10/17/2006 16:56

Image# 26930471440

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) 655 Beach Street ADDRESS (number and street) Check if different than previously San Francisco CA 94109 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00196246 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 09 0 1 2006 09 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Benjamin Bank Type or Print Name of Treasurer Electronically Filed by Benjamin Bank 10 13 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS
Page 2

Report Covering the Period: From:	01 2006	To: 0 9 3 0 2 0 0 6
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1 Y2006 Y		535866.50
(b) Cash on Hand at Begining of Reporting Period	583825.69	
(c) Total Receipts (from Line 19)	79461.98	544169.07
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	663287.67	1080035.57
Total Disbursements (from Line 31)	151107.92	567855.82
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	512179.75	512179.75
Debts and Obligations owed TO		
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations owed BY		
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
X This Committee has qualified as a multicandidate	te committee. (see FEC FORM 1M)	

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

2006

3^D0

2006

0.00

544169.07

544169.07

м м 0 9

0 1

Write or Type Committee Name

(c) Total Transfer (add 18(a) and 18(b)).

12, 13, 14, 15, 16, 17, and 18(c))

(subtract Line 18(c) from Line 19)

19. Total Receipts (add Lines 11(d),

20. Total Federal Receipts

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

М М

Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 65015.83 475282.17 (i) Itemized (use Schedule A) 14392.50 67832.75 (ii) Unitemized (iii) TOTAL (add 79408.33 543114.92 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 79408.33 543114.92 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 53.65 1054.15 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5)

0.00

79461.98

79461.98

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 1107.92 8470.82 Expenditures..... (c) Total Operating Expenditures 1107.92 8470.82 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 524000.00 150000.00 24. Independent Expenditure 0.00 35020.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 365.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 365.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 151107.92 567855.82 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)

151107.92

567855.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	79408.33	543114.92
34.	Total Contribution Refunds (from Line 28(d))	0.00	365.00
5.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	79408.33	542749.92
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1107.92	8470.82
7.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88.	Net Operating Expenditures (subtract Line 37 from Line 36)	1107.92	8470.82

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	c Political	Committee (OPHTHPAC)	
Α.	colf	State SD C Occupation Ophthaln		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	Aggregate	500.00	
3.	Full Name (Last, First, Middle Initial) Eric Adams Mailing Address 880 Kempsville Road Sui		7:p Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City Norfolk	State VA	Zip Code 23502-3931	Transaction ID: AEFV56787265 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25502 0501	365.00
	self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00	
) .	Full Name (Last, First, Middle Initial) Ronald Agresta			Date of Receipt
Mailing Address 2315 Sunset Boulevard Suite B				09 / 06 / 4 2006
	City	State	Zip Code	Transaction ID: AEFLVO772831
	Steubenville FEC ID number of contributing federal political committee.	ОН	43952-2496	Amount of Each Receipt this Period 365.00
	self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00	
s	UBTOTAL of Receipts This Page (optional)			1230.00
т.	OTAL This Period (last page this line number only	v)		

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 85 (check only one) X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political	Committee (OPHTHPAC)	
Α.	self	State CA C Cccupation Ophthaln		Date of Receipt M M J D D J Z D D 6 Transaction ID: G9TEFK707853 Amount of Each Receipt this Period 365.00 Batch Tool - PAC
3.	self	State ND C C Cccupation Ophthaln Aggregate		Date of Receipt M M M / 26 / 2006 Transaction ID: G9TQI7770622 Amount of Each Receipt this Period 500.00 Batch Tool - PAC
C.	self	State IL C C C C C C C C C C C C C		Date of Receipt M M J D D J Z D D 6 Transaction ID: AEFYWY123713 Amount of Each Receipt this Period 1000.00 Batch Tool - PAC
S	UBTOTAL of Receipts This Page (optional)		······	1865.00
т	OTAL This Period (last page this line number only))		

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 85	
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	lress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
/	American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)	_
۹.	Full Name (Last, First, Middle Initial) Michael Bennett			Date of Receipt
	Mailing Address 4381 Aukai Avenue			09 / 12 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: AEFV3S244414
	Honolulu	HI	96816-4801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	-
	Primary General Other (specify) ▼	30 13 110	500.00	
3.	Full Name (Last, First, Middle Initial) Adam Berger			Date of Receipt
	Mailing Address 400 Avenue K Southeast Vitreous and Retina Con-			09 / 25 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G9TNDI828451
	Winter Haven	FL	33880-4123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation		Batch Tool - PAC
		Ophthaln		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		365.00	
 C.	Full Name (Last, First, Middle Initial) Robert Bergren			Date of Receipt
	Mailing Address 3501 Forbes Avenue Retina Vitreous Cnslts			09 / 20 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G9TFMI560127
	Pittsburgh	PA	15213-3317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
			Year-to-Date ▼	1
	Primary General Other (specify) ▼	0 0	350.00	
s	UBTOTAL of Receipts This Page (optional)			1215.00
			<u> </u>	
T	OTAL This Period (last page this line number on	ly)		

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I	nc Politica	Committee (OPHTHPAC)	
	Full Name (Last, First, Middle Initial) Louis Betz Mailing Address 3 Hospital Drive City Lewisburg FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State PA C Occupation Ophthalm Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) Thomas Biggs Mailing Address 5825 S Main Street Suit City Clarkston FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State MI C Occupation Ophthaln		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) Steven Bodine Mailing Address 915 Palmer Road Retina Consultations City Bronxville FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State NY C Occupation Ophthaln Aggregate		Date of Receipt M
sı	JBTOTAL of Receipts This Page (optional)			1115.00
T	OTAL This Period (last page this line number of	ılv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 85
ITEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		• • • • • • • • • • • • • • • • • • • •	
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Mark Brower			Date of Receipt
	Mailing Address 504 Willabay Drive			09 07 2006
	City	State	Zip Code	Transaction ID: 03842-13029116392135
	Williams Bay	WI	53191-9627	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	 1	PAC 3rd of 4
	self	Ophthaln		
	Receipt For:	•	Year-to-Date ▼	1
	Primary General Other (specify) ▼	1 1	750.00	
 3.	Full Name (Last, First, Middle Initial) James Bryan			Date of Receipt
	Mailing Address 55 Vilcom Center Suite 1	09 / 01 / 2006		
	City	State	Zip Code	Transaction ID: AEFEAO368148
	Chapel Hill	NC	27514-1690	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer self	Occupation		Batch Tool - PAC
		Ophthaln		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		365.00	
).	Full Name (Last, First, Middle Initial) Jeffrey Camp			Date of Receipt
	Mailing Address 10956 Donner Pass Road	d Suite 12	0	09 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G9TI7D585672
	Truckee	CA	96161-4860	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			865.00
_	OTAL Title Decidal (Co. 1997)			
T	OTAL This Period (last page this line number only	y)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Statement for commercial purposes, other than using the name an	s may	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Pol	litical	Committee (OPHTHPAC)	
Α.	colf	upation	Zip Code 23606-4206	Date of Receipt M M
	Receipt For: Primary General Other (specify) ▼	regate	Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Edward Cherney Mailing Address 6413 Edinburgh Drive City Sta	ıto.	Zip Code	Date of Receipt M M
	Nashville TN FEC ID number of contributing federal political committee. C		37221-3721	Amount of Each Receipt this Period
	self Oph		nologist Year-to-Date ▼	Batch Tool - PAC
Full Name (Last, First, Middle Initial) Andrew Choy Mailing Address 4100 Long Beach Boulevard Suite 10				Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City Star Long Beach CA FEC ID number of contributing federal political committee.		Zip Code 90807-2696	Transaction ID: G9TS10567148 Amount of Each Receipt this Period 365.00
	self Ophi		nologist Year-to-Date ▼	Batch Tool - PAC
s	UBTOTAL of Receipts This Page (optional)		·····	2365.00
Т	OTAL This Period (last page this line number only)			

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 85 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)	
<u>΄</u> Δ.	Full Name (Last, First, Middle Initial) John Colombo			Date of Receipt
	Mailing Address 22835 Kelly Road			09 06 2006
	City Eastpointe	State MI	Zip Code 48021-2073	Transaction ID: AEFLVO424235 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1002 2010	365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 365.00	
3.	Full Name (Last, First, Middle Initial) Peter Condax			Date of Receipt
	Mailing Address 2747 Crescent Street Su Retina Specialists of New City	0 9 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Astoria	State NY	Zip Code 11102-3142	Transaction ID: AEFNA2014713 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00	
) .	Full Name (Last, First, Middle Initial) David Cooke			Date of Receipt
	Mailing Address 4842 W Chapin Lane		7.0.	09 13 2006
	City Berrien Springs	State MI	Zip Code 49103-9631	Transaction ID: AEFWK4774161 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SI	JBTOTAL of Receipts This Page (optional)		·····	980.00
T	OTAL This Period (last page this line number on	ly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/85
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
_				13 14 15 16 17
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Academy of Ophthalmology	Inc Political	Committee (OPHTHPAC)	
Α.	Full Name (Last, First, Middle Initial) Thomas Crawford			Date of Receipt
	Mailing Address 5050 Northeast Hoyt S	treet Suite 4	1	M M / D D / Y Y Y Y Y O O O O O
	City	State	Zip Code	Transaction ID: G9TI7D178543
	Portland	OR	97213-2984	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	-
	Primary General Other (specify) ▼	33.53	365.00	
В.	Full Name (Last, First, Middle Initial) Carolyn Cruvant			Date of Receipt
	Mailing Address 3006 S Maryland Parkv	vay Suite 2 ⁻	15	09 19 2006
	City	State	Zip Code	Transaction ID: G9TEFK918177
	Las Vegas	NV	89109-6213	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		e Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼	0 0	500.00	
C.	Full Name (Last, First, Middle Initial) Philip Custer			Date of Receipt
•	Mailing Address PO Box 8096			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G9TNDI405728
	Saint Louis	MO	63156-8096	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
			e Year-to-Date ▼	7
	Primary General Other (specify) ▼		365.00	
s	UBTOTAL of Receipts This Page (optional)			1230.00
Т	OTAL This Period (last page this line number of	only)		

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any or fo	information copied from such Reports and State or commercial purposes, other than using the nar	ements may me and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Ind	c Political	Committee (OPHTHPAC)	
- C C C C F F F F F F F F F F F F F F F	Receipt For: Primary General Other (specify) ▼	State OH C Occupation Ophthaln Aggregate		Date of Receipt M M D D 2 0 0 6
3. : N	ealf ' '	State KS C Occupation Ophthaln		Date of Receipt M M M
C. (N) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	solf	State VA C Occupation Ophthaln		Date of Receipt M M Z D Z D Z D O 6 Transaction ID: G9TGYC715483 Amount of Each Receipt this Period 1000.00 Batch Tool - PAC
SU	BTOTAL of Receipts This Page (optional)		······	1490.00
το	TAL This Period (last page this line number only	v)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/85
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Leugene De Juan			Date of Receipt
Mailing Address Jean Kelly Stock Distir University of California	ı; Beckman		09 29 2006
City <u>San Francisco</u>	State CA	Zip Code 94143-0001	Transaction ID: G9TTW2727929 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Thomas Deutsch			Date of Receipt
Mailing Address 1725 W Harrison Stree		09 / 19 / 2006	
City <u>Chicago</u>	State II	Zip Code 60612-3863	Transaction ID: G9TEFK473912
FEC ID number of contributing federal political committee.	C	00012-3003	Amount of Each Receipt this Period 500.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Anna Di Lorenzo			Date of Receipt
Mailing Address 2877 Crooks Rd. Suite	e В		09 20 7 9 9 9
City	State	Zip Code	Transaction ID: 03842-20063418149948
Troy FEC ID number of contributing federal political committee.	C	48084-4717	Amount of Each Receipt this Period 250.00
Name of Employer self	Occupatio Ophthalr	nologist	PAC 4th of 4
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 / 85 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nan	ments may ne and ado	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	: Political	Committee (OPHTHPAC)	
Α.	Full Name (Last, First, Middle Initial) Alan Dorfman Mailing Address 510 West Avenue			Date of Receipt
	PO Box 2099 City	State	Zip Code	0 9 2 8 2 0 0 6 Transaction ID: G9TS1O778855
	<u>Jenkintown</u>	PA	19046-2725	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	colf ' '	Occupation Ophthalm		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Mark Drabkin			Date of Receipt
	Mailing Address 3707 Maidu Place	09 / 14 / 2006		
	City Davis	State CA	Zip Code 95618-5081	Transaction ID: AEFXLD607756
	FEC ID number of contributing federal political committee.	C	93010-3081	Amount of Each Receipt this Period 333.33
	solf '	Occupatior Ophthalm		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.67	
) .	Full Name (Last, First, Middle Initial) Robert Dreher			Date of Receipt
	Mailing Address 34 Old County Road Maine Coast Eye Care	Olata	7'- 0 - 1-	0 9
	City Rockport	State ME	Zip Code 04856-4004	Transaction ID: G9TQI7743155 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	self	Occupatior Ophthalm	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 365.00	
S	UBTOTAL of Receipts This Page (optional)			1198.33
_	OTAL This Period (last page this line number only	Λ		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/85
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Steven Dresner			Date of Receipt
	Mailing Address 2121 Wilshire Boulevard	Suite 301		09 / 20 / 4 2006
	City Septe Manica	State CA	Zip Code	Transaction ID: G9TFMI831312
	Santa Monica		90403-5743	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	365.00	
3.	Full Name (Last, First, Middle Initial) M. Driver			Date of Receipt
Mailing Address 801 W 38th Street Suite 300		300		09 / 07 / 4 2006
	City	State	Zip Code	Transaction ID: AEFNA2659136
	Austin	TX	78705-1167	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation		Batch Tool - PAC
	Receipt For:	Ophthaln	nologist e Year-to-Date ▼	_
	Primary General	Aggregate		
	Other (specify) ▼		365.00	
).	Full Name (Last, First, Middle Initial) Mark Dwyer			Date of Receipt
	Mailing Address 1233 34th Street Northwo Merit Care Clinic Bemidji	est		09 / 07 / 4 2006
	City	State	Zip Code	Transaction ID: AEFNA2267513
	Bemidji	MN	56601-5112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			980.00
			_	
T	OTAL This Period (last page this line number on	ly)	>	

SCHEDULE A (FEC Form 3X)		Lisa sanarata sahadula(a)	FOR LINE NUMBER: PAGE 18 / 85
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and Si	atements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) A. Robert Dykstra			Date of Receipt
Mailing Address 7232 Engle Road			09 19 2006
City Fort Wayne	State IN	Zip Code 46804-2222	Transaction ID: 03842-57543581724167 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer self	Occupatio Ophthalr		PAC 3rd of 4
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		375.00	
Full Name (Last, First, Middle Initial) 8. Ralph Eagle			Date of Receipt
Mailing Address 840 Walnut Street Suit Wills Eye Hospital	e 1410		09 / 29 / 2006
City	State	Zip Code	Transaction ID: G9TTW2336140
Philadelphia	PA	19107-5109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) 7. Timothy Ehlen			Date of Receipt
Mailing Address 2805 Campus Drive Su	iite 105		09 06 YYYYY 09 06 2006
City	State	Zip Code	Transaction ID: AEFLVO973171
Plymouth	MN	55441-2677	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)			1125.00
TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)		l lea caparata cabadula(a)	FOR LINE NUMBER: PAGE 19 / 85
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mag	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	y Inc Politica	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Suzanne Everhart Mailing Address 211 England St. Suite	e D		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Ashland	State VA	Zip Code 23005-2086	Transaction ID: AEFV56168521 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000 2000	500.00
Name of Employer self Receipt For:	Occupatio Ophthalr		Batch Tool - PAC
Primary General Other (specify) ▼	Aggregate	500.00	
Full Name (Last, First, Middle Initial) Madeleine Ewing Mailing Address 700 Spruce Street Su	ita 100		Date of Receipt
			09 13 2006
City Philadelphia	State PA	Zip Code 19106-4023	Transaction ID: AEFWK4822219
FEC ID number of contributing federal political committee.	C	19100-4023	Amount of Each Receipt this Period 250.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 2. John Favetta	·		Date of Receipt
Mailing Address 70 Ridge Road			09 19 2006
City	State	Zip Code	Transaction ID: 03842-35876101255417
North Arlington	NJ	07031-6318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		91.25 PAC 3rd of 4
Name of Employer self	Occupatio Ophthalr	nologist	17/0 0/0 0/4
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 273.75	
SUBTOTAL of Receipts This Page (optional)			841.25
TOTAL This Period (last page this line number	r only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 85 (check only one) X
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	c Political	Committee (OPHTHPAC)	
Α.	colf	State IN C C Occupation Ophthaln Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼		500.00	
3.	solf '	State TX C Occupation Ophthaln		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
- .	a olf	State OH C Occupation Ophthaln Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		······•	1230.00
Т	OTAL This Period (last page this line number only	v)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	c Political	Committee (OPHTHPAC)	
	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	State DC C Occupation Ophthaln	Zip Code 20003-4347	Date of Receipt M M
3.	colf	of Boston State MA C Occupation Ophthaln		Date of Receipt M M
) .	colf	State NY C Occupation Ophthaln Aggregate		Date of Receipt M M M / D D / 2 6 2 0 0 6 Transaction ID: G9TQI7722204 Amount of Each Receipt this Period 400.00 Batch Tool - PAC
s	UBTOTAL of Receipts This Page (optional)		_	1130.00
T	OTAL This Period (last page this line number only	v)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political	Committee (OPHTHPAC)	
A .	Name of Employer self	State NY C Description Description Description Description Description Aggregate		Date of Receipt M M J D D J 2 2006 Transaction ID: AEFV3S241678 Amount of Each Receipt this Period 250.00 Batch Tool - PAC
3.	Full Name (Last, First, Middle Initial) Joan Gewirtz Mailing Address 70 Mill River Street Suite L			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stamford FEC ID number of contributing federal political committee.	State CT	Zip Code 06902-3725	Transaction ID: G9TI7D568262 Amount of Each Receipt this Period 500.00
	self	Occupation Ophthalm Aggregate		Batch Tool - PAC
- .	Full Name (Last, First, Middle Initial) Kris Gillian Mailing Address 575 Professional Drive Sui	ite 100		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City Lawrenceville FEC ID number of contributing federal political committee.	State GA	Zip Code 30045-3300	Transaction ID: G9TTW2866972 Amount of Each Receipt this Period 365.00
	Name of Employer self (C) Receipt For: Primary General	Occupation Ophthalm	nologist Year-to-Date ▼	Batch Tool - PAC
	UBTOTAL of Receipts This Page (optional)		365.00	1115.00
T	OTAL This Period (last page this line number only))	>	

S	CHEDULE A (FEC Form 3X)		Lice congrate cohodulo(c)	FOR LINE NUMBER: PAGE 23 / 85
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I	nc Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Steven Goodrich Mailing Address 621 S New Ballas Road	Suite 585	A	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Saint Louis	State MO	Zip Code 63141-8251	Transaction ID: AEFLVO344031 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00	
3.	Full Name (Last, First, Middle Initial) Tom Gordon			Date of Receipt
	Mailing Address 2853 Freeport Road			09 / 13 / 2006
	City	State	Zip Code	Transaction ID: AEFWK4083487
	Natrona Heights FEC ID number of contributing federal political committee.	C	15065-1905	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
).	Full Name (Last, First, Middle Initial) Joel Gottlieb			Date of Receipt
	Mailing Address 66 Sunset Strip Suite 10 Roxbury Eye Center Pc)7		09 / 28 / 2006
	City	State	Zip Code	Transaction ID: G9TS9P620356
	Succasunna FEC ID number of contributing federal political committee.	C	07876-1362	Amount of Each Receipt this Period 1000.00
	Name of Employer self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)		·····	1865.00
Т	OTAL This Period (last page this line number or	าly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 85 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog			o Suich Continuations from Such Committee.
Full Name (Last, First, Middle Initial) Christopher Greer Mailing Address PO Box 3528 Cooper Clinic City Fort Smith FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State AR C Occupatio Ophthalr Aggregate		Date of Receipt M
Full Name (Last, First, Middle Initial) John Griffin Mailing Address 475 Irving Avenue Su City Syracuse FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State NY C Occupatio Ophthalr		Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Paul Gulbas Mailing Address 1201 N Mesa Street City El Paso FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State TX C Occupatio Ophthalr Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional))	740.00
TOTAL This Period (last page this line number	er only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 85
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Ir			
۹.	Full Name (Last, First, Middle Initial) Leo Harf			Date of Receipt
	Mailing Address 999 N Curtis Road Suite Intermountain Eye Clinic			09 / 26 / Y Y Y Y Y Y
	City Boise	State ID	Zip Code 83706-1316	Transaction ID: G9TQI7253341 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	03/00-1310	500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	•	e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Christopher Haupert			Date of Receipt
	Mailing Address 1501 50th Street Suite 1: Iowa Retina Consultants			09 / 19 / 2006
	City West Des Moines	State IA	Zip Code 50266-5920	Transaction ID: 03842-08095949888229
	FEC ID number of contributing federal political committee.	C	30200-3320	Amount of Each Receipt this Period 91.25
	Name of Employer self	Occupation Ophthaln		PAC 3rd of 4
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 273.75	
).	Full Name (Last, First, Middle Initial) Edward Hernandez			Date of Receipt
	Mailing Address 2030 S Solano Drive			09 / 26 / Y Y Y Y Y
	City Las Cruces	State NM	Zip Code 88001-5402	Transaction ID: G9TQI7831275
	FEC ID number of contributing federal political committee.	C	00001-3402	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1091.25
T	OTAL This Period (last page this line number on	ly)	>	

S	CHEDULE A (FEC Form 3X)		Lica congrata cabadula(s)	FOR LINE NUMBER: PAGE 26 / 85
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology			
Α.	Full Name (Last, First, Middle Initial) Jorge Hernandez Mailing Address PO Box 800794 City Coto Laurel FEC ID number of contributing federal political committee.	State PR	Zip Code 00780-0794	Date of Receipt M M
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Batch Tool - PAC
В.	Full Name (Last, First, Middle Initial) Paula Hicks Mailing Address PO Box 819 415 W Third Street			Date of Receipt M
	City	State	Zip Code	Transaction ID: AEFKBD612217
	Yankton FEC ID number of contributing federal political committee. Name of Employer self Receipt For:	C Occupation Ophthalm		Amount of Each Receipt this Period 500.00 Batch Tool - PAC
_	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	500.00	
C.	William Hipps Mailing Address 2615 Forest Ridge Driv City	e State	Zip Code	Date of Receipt 0 9 2 5 2 0 0 6 Transaction ID: G9TNDI285128
	Missouri City	TX	77459-2645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00 Batch Tool - PAC
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Daton 1001-1 AO
s	UBTOTAL of Receipts This Page (optional)			1165.00
Т	OTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 27/85
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Statemer	ents may and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Pe	Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Paul Hiss Mailing Address 2285 Green Vista Drive			Date of Receipt
		State	Zip Code	0 9 1 8 2 0 0 6 Transaction ID: FGNDSL685238
	<u>Sparks</u> N	١V	89431-8532	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			1000.00
	colf '	cupation ohthalm	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify)	ggregate	Year-to-Date ▼ 1000.00	
3.	Full Name (Last, First, Middle Initial) John Hofbauer			Date of Receipt
	Mailing Address 416 N Bedford Drive Suite 30	09 / 11 / 2006		
	•	State	Zip Code	Transaction ID: AEFTS4436488
	Beverly Hills C	CA	90210-4309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			1000.00 Batch Tool - PAC
	solf ' '	cupation ohthalm	n nologist	Balch Tool - PAC
	Receipt For: Ag	ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1000.00	
) .	Full Name (Last, First, Middle Initial) William Holcomb			Date of Receipt
Mailing Address 1890 Al Highway 157 Suite 410		410		09 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City S Cullman A	State AL	Zip Code 35058-0689	Transaction ID: 05078-73402041196823 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			200.00
	self Op		ologist	PAC 3rd of 4
	Receipt For: Primary Other (specify) ▼ Ag Other (specify) ▼	ggregate	Year-to-Date ▼ 600.00	
s	UBTOTAL of Receipts This Page (optional)		······	2200.00
т.	OTAL This Parind (last page this line number only)		•	

SCHEDULE A (FEC Form 3X)		Lisa sanarata sobodulo(s)	FOR LINE NUMBER: PAGE 28 / 85
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) John Irvine Mailing Address 1450 San Pablo Street Doheny Eye Institute	Suite 5703		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Los Angeles	State CA	Zip Code 90033-4500	Transaction ID: AEFYWY107153 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30000 4000	500.00
Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupatio Ophthalr Aggregate		Batch Tool - PAC
Full Name (Last, First, Middle Initial) 3. Mami Iwamoto			Date of Receipt
Mailing Address Ophthalmic Consultant 50 Staniford 6th Floor	09 28 2006		
City	State	Zip Code	Transaction ID: FCJNPLWEST9G7
Boston FEC ID number of contributing federal political committee.	C	02114	Amount of Each Receipt this Period 250.00
Name of Employer self	Occupatio Ophthalr	nologist	PACWEB GENERATED CONTRIBU- TION
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Robert Janigian Mailing Address 158 Meshanticut Valley	Parkway		Date of Receipt
	09 30 2006		
City <u>Cranston</u>	State RI	Zip Code 02920-3964	Transaction ID: 06903-68925112485886 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer self	Occupatio Ophthalr	nologist	PAC 2nd of 4
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			875.00
TOTAL This Period (last page this line number of	only)	.	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 29 / 85
	EMIZED RECEIPTS		or each category of the	(check only one)	🗖
•			Detailed Summary Page	X 11a 11b 14	11c 12 15 16 17
Ar	y information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may	not be sold or used by any perso		
or		e and add	ress of any political committee to	solicit contributions from su	uch committee.
\	NAME OF COMMITTEE (In Full)				
/	American Academy of Ophthalmology Inc P	Political	Committee (OPHTHPAC)		
۹.	Full Name (Last, First, Middle Initial) Paul Jones			Date of Receipt	
	Mailing Address 1550 Riverside Avenue			09 / 25	2006
	•	State	Zip Code	Transaction ID: G9	TNDI029732
	<u>Jacksonville</u> F	<u>FL</u>	32204-4161	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			365.00
	Name of Employer Oc self	ccupation		Batch Tool - PAC	
	self Op	phthalm			
			Year-to-Date ▼		
	Primary General	-	365.00		
	Other (specify)	0 0	303.00		
3.	Full Name (Last, First, Middle Initial) Richard Jones			Date of Receipt	
	Mailing Address 4925 J Street			09 27	2006
	City	State	Zip Code	Transaction ID: G9	TQ17825567
	<u>Sacramento</u>	CA	95819-3828	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	colf	ccupation		Batch Tool - PAC	
	Op	phthalm			
		ggregate	Year-to-Date ▼		
	Primary General Other (specify)		500.00		
		0 0			
Э.	Full Name (Last, First, Middle Initial) Jeffrey Kearfott			Date of Receipt	
	Mailing Address 20 S Burnett Road Kearfott Eye Group Inc			09 / 06	2006
	City	State	Zip Code	Transaction ID: AEI	ELVO868435
	<u>Springfield</u> C	<u>OH</u>	45505-1489	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C ;			300.00
	colf	ccupation		Batch Tool - PAC	
Opn		phthalm		4	
	Receipt For: Ag	ggregate	Year-to-Date ▼		
	Other (specify)		300.00		
_					1165.00
<u>s</u>	UBTOTAL of Receipts This Page (optional)		······		1100.00
_	OTAL This Period (last page this line number only)				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 85	
ITEMIZED RECEIPTS		or each category of the	(check only one)		
TEMPLE RECEIL TO		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Δη	w information conied from such Reports and St	atemente mai	y not be cold or used by any perso		
or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
	American Academy of Ophthalmology	Inc Political	Committee (OPHTHPAC)		
Α.	Full Name (Last, First, Middle Initial) James Kiley			Date of Receipt	
	Mailing Address 3320 Executive Drive S	Suite 111		09 18 2006	
	City	State	Zip Code	Transaction ID: FGNDSL996221	
	Raleigh	NC	27609-7445	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		365.00	
	Name of Employer self	Occupation		Batch Tool - PAC	
	Receipt For:	Ophthaln	Year-to-Date V	-	
	Primary General	Aggregate	Teal to Date ¥		
	Other (specify) ▼		365.00		
В.	Full Name (Last, First, Middle Initial) Stephen Knight			Date of Receipt	
	Mailing Address 930 Springdale Road N	09 06 2006			
	City	State	Zip Code	Transaction ID: AEFLVO147557	
	Atlanta	GA	30306-2628	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer	Occupation	1	Batch Tool - PAC	
	self	Ophthaln	nologist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
<u> </u>	Full Name (Last, First, Middle Initial) Robert Knox			Date of Receipt	
	Mailing Address 3000 Rogers Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: FA5U51NIMT9G1	
	Fort Smith	AR	72901-4232	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Name of Employer self	Occupation Ophthaln		PACWEB GENERATED CONTRIBUTION	
	Receipt For:		Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	300.00		
[e	UBTOTAL of Receipts This Page (optional)	915.00			
\vdash	ODITIE OF HECEIPIS THIS FAGE (OPHORIAL)		······································		
T	OTAL This Period (last page this line number of	only)	>		

SCHEDULE A (FEC For	m 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 31 / 85	
ITEMIZED RECEIPTS	- ,	or each category of the	(check only one)	
TEMIZED REGENT TO		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 [7 17
Any information copied from such Ber	oorts and Statements ma	v not be sold or used by any ners		
or for commercial purposes, other tha	n using the name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
American Academy of Ophth	almology Inc Politica	I Committee (OPHTHPAC)		
Full Name (Last, First, Middle Initial Richard Koop	,		Date of Receipt	
Mailing Address 8445 Augusta	a Lane		09 / 22 / 2006	
City	State	Zip Code	Transaction ID: F8Z16FJEIT9G7	
<u>Holland</u>	OH	43528-9243	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		300.00	
Name of Employer self	Occupatio Ophthalr		PACWEB GENERATED CONTRIE TION	3U-
Receipt For:		Year-to-Date ▼		
Primary General Other (specify) ▼		300.00		
Full Name (Last, First, Middle Initial) Alexandra Kostick			Date of Receipt	
Mailing Address 1051 Ocean	09 26 YYYYY]		
City	State	Zip Code	Transaction ID: 05078-8904535174	43699
Ormond Beach	FL	32176-4179	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		91.25	
Name of Employer	Occupatio	n	PAC 3rd of 4	
self	Ophthalr			
Receipt For:	Aggregate	e Year-to-Date ▼		
Primary General Other (specify) ▼	0 0	273.75		
Full Name (Last, First, Middle Initia	al)		Date of Receipt	
]
City	State	Zip Code	Transaction ID: 03842-6713067889	92136
Corona	CA	92881-3110	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		125.00	0
Name of Employer self	Occupatio Ophthalr		PAC 2nd of 4	
Receipt For:	Aggregate	e Year-to-Date ▼		
Primary General Other (specify) ▼	0 0	250.00		
SUBTOTAL of Receipts This Page (optional)	__	516.25	
	. 1/		-	
TOTAL This Period (last page this lin	ne number only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	ıc Political	Committee (OPHTHPAC)	
Α.	Full Name (Last, First, Middle Initial) Baruch Kuppermann Mailing Address Uc Irvine Dpt of Ophth 118 Med Surge I City Irvine FEC ID number of contributing federal political committee. Name of Employer self	State CA C C C C C C C C C C C C C C C C C C		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 365.00	
3.	Full Name (Last, First, Middle Initial) Francis La Rosa Mailing Address 5875 Bremo Road Suite South Medical Office Bui City Richmond FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State VA C Occupation Ophthaln		Date of Receipt M M C 2 1
D.	Full Name (Last, First, Middle Initial) Mitchel Lautenberg Mailing Address 601 Route 37 W Ocean Eye Institute City Toms River FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State NJ C Occupation Ophthaln Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S	UBTOTAL of Receipts This Page (optional)		······•	1365.00
Т	OTAL This Period (last page this line number on	lv)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 85
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIVIIZED NEOEII 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and State	ements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	_
A.	Full Name (Last, First, Middle Initial) Rick Leoni			Date of Receipt
	Mailing Address 203 Rue Louis Xiv Suite	A		09 29 2006
	City	State	Zip Code	Transaction ID: G9TTR5251578
	Lafayette	LA	70508-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer	Occupation	า	PAC 3rd of 4
	colf	Ophthaln		
	Receipt For:		Year-to-Date ▼	
	Primary General		075.00	1
	Other (specify) ▼		375.00	
<u> </u>	Full Name (Last, First, Middle Initial) Han Lim			Date of Receipt
	Mailing Address 5140 N California Avenue Galter Medical Pavilion	09 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: AEFYWY780946
	Chicago	IL	60625-2577	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	colf	Occupation		Batch Tool - PAC
		Ophthaln		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		365.00	
C.	Full Name (Last, First, Middle Initial) Shan Lin			Date of Receipt
•	Mailing Address	Ophth		M " M / D " D / Y " Y " Y " Y
	10 Kirkham Street/K330 City	State	Zip Code	0 9 2 9 2 0 0 6 Transaction ID: G9TTW2167448
	San Francisco	CA	94143-0001	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	300.00
	federal political committee.	C		
	Name of Employer self	Occupation		Batch Tool - PAC
	Receipt For:	Ophthaln	Year-to-Date V	\dashv
	Primary General	Aggregate	Teal to Bate V	1
	Other (specify) ▼		300.00	
	<u> </u>			790.00
S	UBTOTAL of Receipts This Page (optional))	7,00.00
Т	OTAL This Period (last page this line number only	y)		

21	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 34 / 85
			Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Guillinary Fage	13 14 15 16 17
An	y information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the nar	me and add	dress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology Ind	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Mark Lindsay			Date of Receipt
	Mailing Address 2725 E 29th Street			0 9 1 2 2 0 0 6
	City	State	Zip Code	Transaction ID: AEFV56522029
	Bryan	TX	77802-2504	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		25.00
	colf	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	-
	Primary General	39 - 5		1
	Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) Robert Liss			Date of Receipt
	Mailing Address 915 Old Fern Hill Road Si	M M / D D / Y Y Y Y		
				09 27 2006
	City	State	Zip Code	Transaction ID: G9TQI7688521
	West Chester	PA	19380-4269	Amount of Each Receipt this Period
	FEC ID number of contributing	С		365.00
	federal political committee.			
		Occupation	n	Batch Tool - PAC
	self	Ophthaln	nologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	· · ·	365.00	
	Other (specify)	0 0	303.00	
	Full Name (Last, First, Middle Initial)			
Э.	Samuel Lo			Date of Receipt
	Mailing Address 1441 Kapiolani Boulevard	Suite 41	8	09 19 2006
	City	State	Zip Code	Transaction ID: 03842-86545962095261
	Honolulu	HI	96814-4400	Amount of Each Receipt this Period
	FEC ID number of contributing		000111100	
	federal political committee.	C		125.00
	Name of Employer self	Occupation	 1	PAC 3rd of 4
	self	Ophthaln		
	Receipt For:		e Year-to-Date ▼	
	Primary General		075.00	
	Other (specify) ▼		375.00	
s	UBTOTAL of Receipts This Page (optional)			515.00
_				
T	OTAL This Period (last page this line number only	y)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 35 / 85
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Stat- for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Richard Lomas			Date of Receipt
	Mailing Address 17800 Talbot Rd. S			09 / 22 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G9TI7D204262
	Renton	WA	98055-5740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	365.00	
3.	Full Name (Last, First, Middle Initial) Manuel Lopez De Victoria			Date of Receipt
	Mailing Address 1250 Avenue Jesus T Pir	09 / 19 / 2006		
	City	State	Zip Code	Transaction ID: G9TEFK682943
	San Juan	PR	00921-1616	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation		Batch Tool - PAC
		Ophthaln	•	4
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		250.00	
) .	Full Name (Last, First, Middle Initial) Maureen Lundergan			Date of Receipt
	Mailing Address 1025 E 3300 S Suite B			09 / 26 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G9TQI7023873
	Salt Lake City	UT	84106-4389	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
s	UBTOTAL of Receipts This Page (optional)			980.00
_			·	
T	OTAL This Period (last page this line number on	ly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ime and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
A. 3.	Full Name (Last, First, Middle Initial) Ben Mahan Mailing Address 926 N Jackson Street PO Box 1118 City Tullahoma FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) City Full Name (Last, First, Middle Initial) Raoul Maizel Mailing Address 2224 Alaqua Drive City Longwood FEC ID number of contributing federal political committee.	State TN C Occupation Ophthaln Aggregate State FL C		Date of Receipt M
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Batch Tool - PAC
D.	Full Name (Last, First, Middle Initial) Sid Mandelbaum Mailing Address 178 E 71st Street City New York FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State NY C Occupation Ophthaln Aggregate		Date of Receipt M M 2 0 0 6 Transaction ID: AEFXMT234529 Amount of Each Receipt this Period 365.00 Batch Tool - PAC
s	UBTOTAL of Receipts This Page (optional)		_	740.00
T	OTAL This Period (last page this line number on	lv)	.	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I	nc Politica	I Committee (OPHTHPAC)	
A .	Full Name (Last, First, Middle Initial) Mark Mannis Mailing Address 4860 Y Street # 2400 Uc Davis Department of City Sacramento FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State CA C Occupation Ophthaln	Zip Code 95817-2307	Date of Receipt M M Z 7 Z 0 0 6 Transaction ID: 05078-98276919126511 Amount of Each Receipt this Period 125.00 PAC 3rd of 4
3.	Full Name (Last, First, Middle Initial) Richard Mauer Mailing Address 3410 Kimball Avenue Mauer Eye Center Pc City Waterloo FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State IA C Occupation Ophthalm Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) Donald May Mailing Address PO Box 1678 City Lubbock FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State TX C Occupation ophthalm Aggregate		Date of Receipt M
s	UBTOTAL of Receipts This Page (optional)			1250.00
T	OTAL This Period (last page this line number or	nlv)		

S	CHEDULE A (FEC Form 3X)		l lea canarata cahadula(a)	FOR LINE NUMBER: PAGE 38 / 85
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I	nc Politica	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Charles McCash Mailing Address 85 Northeast Loop 410 Children's Eye Center of			Date of Receipt 0 9 2 2 2 0 0 6
	City San Antonio	State TX	Zip Code 78216-5844	Transaction ID: G9TI7D483634 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	102100011	1000.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Batch Tool - PAC
3.	Full Name (Last, First, Middle Initial) David McClure Mailing Address 1255 Pineview Drive			Date of Receipt
				09 19 2006
	City	State WV	Zip Code	Transaction ID: 03842-40909975767136
	Morgantown FEC ID number of contributing federal political committee.	C	26505	Amount of Each Receipt this Period 375.00
	Name of Employer self	Occupation Ophthaln	nologist	PAC 3rd of 4
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1125.00	
) .	Full Name (Last, First, Middle Initial) Bobby McCullen			Date of Receipt
	Mailing Address 2325 Aberdeen Bouleva	rd Suite A		09 06 2006
	City	State	Zip Code	Transaction ID: AEFLVO620263
	Gastonia FEC ID number of contributing federal political committee.	NC C	28054-0614	Amount of Each Receipt this Period 1000.00
	Name of Employer self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)			2375.00
т	OTAL This Period (last page this line number o	nly))	

S	CHEDULE A (FEC Form 3X)		Harasanaha I. I.I.O.	FOR LINE NUMBER: PAGE 39 / 85		
			Use separate schedule(s) or each category of the	(check only one)		
ıı	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
$\overline{}$	NAME OF COMMITTEE (In Full)					
\rangle	American Academy of Ophthalmology I	nc Politica	I Committee (OPHTHPAC)			
۹.	Full Name (Last, First, Middle Initial) William Mieler			Date of Receipt		
	Mailing Address Department of Ophth 5841 S Maryland Avenu	e Mc 2114		09 / 11 / 2006		
	City	State	Zip Code	Transaction ID: AEFTV0183253		
	Chicago	<u>IL</u>	60637-1447	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC		
	Receipt For:	<u> </u>	e Year-to-Date V	-		
	Primary General	1 99 - 9		1		
	Other (specify) ▼	0 0	500.00			
3.	Full Name (Last, First, Middle Initial) Amalia Miranda			Date of Receipt		
	Mailing Address 3435 Northwest 56th St. Building A			09 / 29 / 2006		
	City	State	Zip Code	Transaction ID: 05355-95687502622605		
	Oklahoma City	OK	73112-4448	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		125.00		
	Name of Employer	Occupatio	n	PAC 2nd of 4		
	self	Ophthalr				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		250.00			
	Full Name (Last, First, Middle Initial) Rajendra Modi			Date of Receipt		
•	Mailing Address 5544 Metropolitan Aven	IIE		M M / D D / Y Y Y Y		
				09 12 2006		
	City	State	Zip Code	Transaction ID: AEFV56357147		
	Ridgewood	NY	11385-1221	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		365.00		
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC		
			e Year-to-Date ▼			
	Primary General		005.00			
	Other (specify) ▼	0 0	365.00			
s	UBTOTAL of Receipts This Page (optional)			990.00		
T	OTAL This Period (last page this line number or	nly)	>			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 40 / 85				
	EMIZED RECEIPTS		or each category of the	(check only one)				
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
An	y information copied from such Reports and Stat	tements may	not be sold or used by any perso					
or	for commercial purposes, other than using the na	ame and ado	dress of any political committee to	solicit contributions from such committee.				
\	NAME OF COMMITTEE (In Full)							
\rangle	American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)					
۹.	Full Name (Last, First, Middle Initial) Perry Mollick			Date of Receipt				
	Mailing Address 1 Center Lane			09 / 28 / 2006				
	City	State	Zip Code	Transaction ID: G9TS9P530927				
	Levittown	NY	11756-1032	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC				
	Receipt For:		Year-to-Date V	-				
	Primary General	7.99.094.0						
	Other (specify) ▼	0 0	250.00					
3.	Full Name (Last, First, Middle Initial) Larry Moorman			Date of Receipt				
	Mailing Address 1803 Old Ocilla Road			09 06 7 2006				
	City	State	Zip Code	Transaction ID: AEFLVO647531				
	Tifton	GA	31794-1617	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		365.00				
	Name of Employer self	Occupation	1	Batch Tool - PAC				
		Ophthaln						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼					
	Other (specify)	0 0	365.00					
`	Full Name (Last, First, Middle Initial) Emily Morin			Date of Receipt				
<i>J</i> .	Mailing Address 1339 Gunnell Court			M M / D D / Y Y Y Y				
				09 15 2006				
	City	State	Zip Code	Transaction ID: AEFYWY829274				
	Mc Lean	VA	22102-1517	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		375.00				
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC				
			Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	500.00					
	UDTOTAL of Descints This Description II			990.00				
5	UBTOTAL of Receipts This Page (optional)		······					
T	FOTAL This Period (last page this line number only)							

SCHEDULE A (FEC	Form 3X)	l lea canarata cahadula(a)	FOR LINE NUMBER: PAGE 41 / 85
ITEMIZED RECEIPTS	•	Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from suc or for commercial purposes, other	h Reports and Statements may er than using the name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In American Academy of O	•	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Anthony Musto Mailing Address 3060 Ma City Stratford FEC ID number of contributir federal political committee.	in Street Suite 101 State CT	Zip Code 06614-4945	Date of Receipt M M M
Name of Employer self Receipt For: Primary Gene Other (specify)	00 0		PAC 3rd of 4
Full Name (Last, First, Middle Sean Neel Mailing Address 668 Skyl Eye Clini	ine Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jackson	State TN	Zip Code	Transaction ID: AEFEAO228229
FEC ID number of contributir federal political committee.		38301-3951	Amount of Each Receipt this Period 365.00
Name of Employer self Receipt For: Primary Gene Other (specify) ▼			Batch Tool - PAC
Full Name (Last, First, Middle Chad Norton Mailing Address 400 Wald	e Initial) den Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: AEFEAO535801
Alexandria FEC ID number of contributir federal political committee.	g C	71303-2951	Amount of Each Receipt this Period 500.00
Name of Employer self Receipt For: Primary Gene Other (specify) ▼	""		Batch Tool - PAC
SUBTOTAL of Receipts This P	age (optional)		956.25
TOTAL This Period (last page	this line number only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the i	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
3.	Full Name (Last, First, Middle Initial) Jack Oats Mailing Address 47 Inlet View Path City East Moriches FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Sara O'Connell Mailing Address 7504 Antioch Road City Overland Park FEC ID number of contributing federal political committee.	State KS	nologist e Year-to-Date ▼ 365.00 Zip Code 66204-2622	Date of Receipt M
	Name of Employer self Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Ophthaln Aggregate		
C.	Full Name (Last, First, Middle Initial) James Pancurak Mailing Address 436 Commons Way City Toms River FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State NJ C Occupation Ophthalm Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SI	JBTOTAL of Receipts This Page (optional)			980.00
T	OTAL This Period (last page this line number o	ınlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 85 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using t	Statements mar he name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	gy Inc Politica	I Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Gregory Panzo Mailing Address 2037 Crooked Lake City Eustis FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) H. Patchett Mailing Address 3237 Professional D	State FL C Occupatio Ophthalr Aggregate		Date of Receipt M
City Auburn FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary Other (specify)	State CA C Occupatio Ophthalr		Transaction ID: G9TEFK358868 Amount of Each Receipt this Period 250.00 Batch Tool - PAC
Full Name (Last, First, Middle Initial) Evelyn Paysse Mailing Address 6621 Fannin Street Mc 640.00 City Houston FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State TX C Occupatio Ophthalr Aggregate		Date of Receipt M M M O D D O 1 2 0 0 6 Transaction ID: AEFEAO526457 Amount of Each Receipt this Period 365.00 Batch Tool - PAC
SUBTOTAL of Receipts This Page (optional)			865.00
TOTAL This Period (last page this line numb	er only)		

SCHEDULE A (FEC Form 3X)		Llea coparata cabadula(s)	FOR LINE NUMBER: PAGE 44 / 85	
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a	
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I			
\angle	Full Name (Last, First, Middle Initial)			1
A.	Randall Peairs			Date of Receipt
	Mailing Address 200 Mifflin Avenue			09 / 01 / 2006
	City	State	Zip Code	Transaction ID: AEFEAO875612
	Scranton 550 IB and the street services and the street services and the street services are street services are street services and the street services are street	PA	18503-1982	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) Julie Perry			Date of Receipt
	Mailing Address 999 Adams St. Suite D			09 / 05 / 4 4 4 4
•		State	Zip Code	Transaction ID: AEFKBD809133
	Saint Helena	CA	94574-1148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	<u> </u>	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial)			
C.	James Pinke			Date of Receipt
	Mailing Address 9 Cots Street Suite 1A Shelton Medical Center			09 12 2006
	City Shelton	State CT	Zip Code	Transaction ID: AEFV3S318294
			06484-3866	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthaln		Datch 1001 - PAC
		e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	300.00	
\ 8	UBTOTAL of Receipts This Page (optional)			1050.00
	OTAL This Period (last page this line number o		•	
1 '	Circa (last page this line hamber of	· · · y / · · · · · · · · · · · · · · · · · ·	······································	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	c Political	Committee (OPHTHPAC)			
Α.	Full Name (Last, First, Middle Initial) William Quayle Mailing Address 2855 Gramercy Street Houston Eye Associates		Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Houston	State TX	77025-1635	Transaction ID: G9TQI7909505 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	17020 1000	250.00		
	nolf ' '	Occupation Ophthaln Aggregate		Batch Tool - PAC		
Full Name (Last, First, Middle Initial) Michael Raizman Mailing Address 50 Staniford Street Suite 600				Date of Receipt 0 9 3 0 7 2 0 0 6		
	City State Zip Code			Transaction ID: FDQI3AQPVT9G0		
	Boston	MA	02114-2539	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	solf '	Occupation Ophthalmologist		PACWEB GENERATED CONTRIBU- TION		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
).	Full Name (Last, First, Middle Initial) Peter Rapoza			Date of Receipt		
Mailing Address 165 Cambridge Street Floor 3 Cornea Consultants				09 / 29 / 2006		
	City	State	Zip Code	Transaction ID: FD53E3P6UT9G7		
	Boston FEC ID number of contributing federal political committee.	MA C	02114-2783	Amount of Each Receipt this Period 365.00		
	Ophthalmic Consultants of Boston Receipt For:	Occupation Ophthaln Aggregate		PACWEB GENERATED CONTRIBU-		
	Primary General Other (specify) ▼		365.00			
S	UBTOTAL of Receipts This Page (optional)		>	1115.00		
T	OTAL This Period (last page this line number only	v)	>			

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 46 / 85
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
An or f	y information copied from such Reports and Statemen or commercial purposes, other than using the name a	nts may and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Po			
Δ.	Pueblo CO FEC ID number of contributing federal political committee.		Zip Code 81008	Date of Receipt M M
	self Oph Receipt For: Primary General Other (specify) ▼		ologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Jesse Rigsby Mailing Address 834 N Seminary Street Suite		103		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	tate	Zip Code	Transaction ID: 03842-45484560728073
	Galesburg IL FEC ID number of contributing federal political committee.		61401-2897	Amount of Each Receipt this Period 91.25
	self Oph		ologist Year-to-Date ▼ 273.75	PAC 3rd of 4
Э.	Full Name (Last, First, Middle Initial) Luis Rivera-Rodriguez Mailing Address PO Box 3241			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	•	tate	Zip Code 00681-3241	Transaction ID: 03842-41334170103073
	Mayaguez PF FEC ID number of contributing federal political committee. C		00001-3241	Amount of Each Receipt this Period 91.25
	Self Oph		ologist Year-to-Date ▼ 273.75	PAC 3rd of 4
sı	JBTOTAL of Receipts This Page (optional)		······	682.50
т/	OTAL This Period (last page this line number only)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 47 / 85
	EMIZED RECEIPTS		or each category of the	(check only one)
• •			Detailed Summary Page	X 11a 11b 11c 12 17 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Alan Row			Date of Receipt
	Mailing Address 3813 22nd Street			09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: AEFV3S444785
	Lubbock	TX	79410-1199	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer	Occupation	1	Batch Tool - PAC
	self	Ophthaln		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		365.00	
 3.	Full Name (Last, First, Middle Initial) E. Salvitti			Date of Receipt
	Mailing Address 750 E Beau Street Southwestern Pa Eye Ce	nter		09 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: AEFLVO231867
	Washington	PA	15301-6661	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer self	Occupation		Batch Tool - PAC
		Ophthaln		4
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	0 0	300.00	
	Full Name (Last, First, Middle Initial) Loren Schrenk			Date of Receipt
	Mailing Address 12818 Tesson Ferry Roa	d Suite 20	01	09 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G9TS1O559552
	Saint Louis	MO	63128-2945	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
_				1030.00
S	UBTOTAL of Receipts This Page (optional)		······	
Т	OTAL This Period (last page this line number onl	y))	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		PAGE 48/85
	EMIZED RECEIPTS		or each category of the	(check only one)	. 🗖
•			Detailed Summary Page	X 11a 11b 1	1c 12 5 16 17
Δn	v information copied from such Reports and State	tements may	not he sold or used by any nerso		
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such	n committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
\rangle	American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)		
۹.	Full Name (Last, First, Middle Initial) Gerald Schultz			Date of Receipt	
	Mailing Address 81893 Doctor Carreon B	oulevard S	Gui	09 / 18 /	2006
	City	State	Zip Code	Transaction ID: FGND	SL472666
	Indio	CA	92201-5592	Amount of Each Receip	t this Period
	FEC ID number of contributing federal political committee.	C			300.00
	Name of Employer self	Occupation	 n	Batch Tool - PAC	
	self	Ophthaln			
	Receipt For:		e Year-to-Date ▼		
	Primary General	1 1	200.00		
	Other (specify) ▼		300.00		
3.	Full Name (Last, First, Middle Initial) Timothy Scott			Date of Receipt	
	Mailing Address 323 N Prairie Avenue Su	iite 201		09 25	2006
	City	State	Zip Code	Transaction ID: G9TN	IDI394526
	Inglewood	CA	90301-4504	Amount of Each Receip	t this Period
	FEC ID number of contributing federal political committee.	C			365.00
	Name of Employer	Occupation	n	Batch Tool - PAC	
	self	Ophthaln			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	, ,	365.00		
	Other (specify) ▼		0 0 0 0 0 0 0		
Э.	Full Name (Last, First, Middle Initial) Barry Seibel			Date of Receipt	
	Mailing Address 11620 Wilshire Boulevar	d Suite 71	1	0 9	2006
	City	State	Zip Code	Transaction ID: G9TE	FK873478
	Los Angeles	CA	90025-1781	Amount of Each Receip	t this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC	
	Receipt For:		Year-to-Date ▼		
	Primary General	00 0			
	Other (specify)	0 0	500.00		
s	UBTOTAL of Receipts This Page (optional)				1165.00
	,		•	-	
T	OTAL This Period (last page this line number or	ıly)			

SCHEDULE A (FEC Foi	rm 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 49 / 85
TEMIZED RECEIPTS	,	or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Re or for commercial purposes, other that	eports and Statements may an using the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		-	
American Academy of Ophth		I Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initi A. Christian Serdahl	ial)		Date of Receipt
Mailing Address 4925 J Stree	et		09 / 06 / 4 2006
City	State	Zip Code	Transaction ID: AEFLVO611613
Sacramento	CA	95819-3828	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
Name of Employer	Occupation	n	Batch Tool - PAC
self	Ophthaln	nologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		365.00	
Full Name (Last, First, Middle Initi	ial)		Date of Receipt
Mailing Address 33 Upper Riv	verdale Road Southwe	est	09 26 7 2006
City	State	Zip Code	Transaction ID: G9TP9D364570
Riverdale	GA	30274-2642	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer self	Occupation		Batch Tool - PAC
	Ophthaln		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
Other (specify)	0 0	1000.00	
Full Name (Last, First, Middle Initi	ial)		Date of Receipt
Mailing Address 608 Stanton	L Young Boulevard		09 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: G9TI7D626865
Oklahoma City	OK	73104-5014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		365.00	
SUBTOTAL of Receipts This Page	(optional)		1730.00
CODICIAL OF HOOOIPIS THIS Page	(optional)		
TOTAL This Period (last page this I	ine number only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		PAGE 50/85
	EMIZED RECEIPTS		or each category of the	(check only one)	. 🗆
••			Detailed Summary Page		1c 12 5 16 17
Δr	w information conied from such Reports and St	atomonte may	unot he cold or used by any perso		
or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from suc	h committee.
	NAME OF COMMITTEE (In Full)				
\rangle	American Academy of Ophthalmology	Inc Political	Committee (OPHTHPAC)		
Α.	Full Name (Last, First, Middle Initial) Eric Sieck			Date of Receipt	
	Mailing Address 921 Birdie Lane			09 / 06	2006
	City	State	Zip Code	Transaction ID: AEFL	
	Quincy	<u>IL</u>	62305-6194	Amount of Each Receip	ot this Period
	FEC ID number of contributing federal political committee.	C			365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC	
	Receipt For:		e Year-to-Date ▼		
	Primary General		205.00		
	Other (specify) ▼	0 0	365.00		
В.	Full Name (Last, First, Middle Initial) Bonnie Silverman			Date of Receipt	
	Mailing Address 475 Tuckahoe Road Su	iite 203		09 / 08	2006
	City	State	Zip Code	Transaction ID: AEFO)F3180974
	Yonkers	NY	10710-5716	Amount of Each Receip	ot this Period
	FEC ID number of contributing federal political committee.	С			365.00
	Name of Employer	Occupation	n	Batch Tool - PAC	
	self	Ophthaln	nologist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		365.00		
	Other (specify) ▼	0 0	303.00		
C.	Full Name (Last, First, Middle Initial) Ronald Simone			Date of Receipt	
	Mailing Address 302 Randall Road Suite		7:0:	09 / 13	2006
	City	State	Zip Code	Transaction ID: AEFV	
	Geneva	IL	60134-4209	Amount of Each Receip	ot this Period
	FEC ID number of contributing federal political committee.	C			365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC	
	Receipt For:		e Year-to-Date ▼		
	Primary General		730.00		
	Other (specify)	0 0	730.00		
s	UBTOTAL of Receipts This Page (optional)				1095.00
T	OTAL This Period (last page this line number of	only)	>		

٧	CHEDIII E A /EEC Earm 2V)			FOR LINE NUMBER: PAGE 51 / 85
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Summary Fage	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
An	y information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	lress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Jeffrey Slott			Date of Receipt
	Mailing Address 400 Westhampton Statio	n		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: G9TS1O137233
	Richmond	VA	23226-3330	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date V	-
	Primary General	Aggregate	Teal to Bate ¥	
	Other (specify)		365.00	
		0 0	0 0 0 0 0 0 0	\
 3.	Full Name (Last, First, Middle Initial) Brian Smith			Date of Receipt
	Mailing Address 138 W Avon Parkway			M M / D D / Y Y Y Y
	Too w /won i dikway	09 27 2006		
	City	State	Zip Code	Transaction ID: 05078-00173586606979
	Asheville	NC	28804-1410	Amount of Each Receipt this Period
	FEC ID number of contributing			105.00
	federal political committee.	C		125.00
				PAC 3rd of 4
	Name of Employer self	Occupation		
	Baselet Fee	Ophthaln		4
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	375.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	
 Э.	Full Name (Last, First, Middle Initial) L. Smith			Date of Receipt
	Mailing Address 10 Vision Lane			M M / D D / Y Y Y Y
	the Eye Center of Natche	z; Inc.		09 19 2006
	City	State	Zip Code	Transaction ID: G9TEFK754535
	Natchez	MS	39120-4607	Amount of Each Receipt this Period
	FEC ID number of contributing			365.00
	federal political committee.	C		303.00
	Name of Employer	Occupation	<u> </u>	Batch Tool - PAC
	Name of Employer self	Ophthaln		
	Receipt For:		Year-to-Date ▼	-
	Primary General	riggrogate	rear to Bate ¥	
	Other (specify)		365.00	
				'
S	UBTOTAL of Receipts This Page (optional)			855.00
	. 5 ,			
T	OTAL This Period (last page this line number onl	y))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 85 (check only one) X
Ar or	y information copied from such Reports and Statem for commercial purposes, other than using the name	nents may e and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political	Committee (OPHTHPAC)	
A.	Fort Myers FEC ID number of contributing federal political committee. Name of Employer self	State FL Ccupatior Ophthalm		Date of Receipt M M M O 9 O 6 2 0 0 6 Transaction ID: FVY5C4S0MFEA Amount of Each Receipt this Period 365.00 PACWEB GENERATED CONTRIBUTION
3.	Charleston FEC ID number of contributing federal political committee. Name of Employer University of Medical Associates	State SC C Cccupation		Date of Receipt M M M / 27 2006 Transaction ID: FBYB001XPT9G6 Amount of Each Receipt this Period 1000.00 PACWEB GENERATED CONTRIBUTION
	Louisville FEC ID number of contributing federal political committee. Name of Employer self	State KY C Occupation Ophthalm		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)			1730.00
T	OTAL This Period (last page this line number only)			

S	CHEDULE A (FEC Form 3X)		Llac concrete cohodulo(a)	FOR LINE NUMBER: PAGE 53 / 85
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and Stati for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u></u>	NAME OF COMMITTEE (In Full)			
$ \rangle$	American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)	
	7 mondan 7 dadomy or opinina mology in	io i diitioai	Committee (Cr Tittii 7(C)	
_	Full Name (Last, First, Middle Initial)			
Α.	John Stabile			Date of Receipt
	Mailing Address 111 Dean Drive			09 15 2006
	City	State	Zip Code	Transaction ID: AEFYWY331360
	Tenafly	NJ	07670-2764	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	Name of Employer	0		Batch Tool - PAC
	Name of Employer self	Occupation Ophthalm		
	Receipt For:		Year-to-Date V	_
	Primary General	, igg. ogaio		1
	Other (specify) ▼	1	1000.00	
	Full Name (Last, First, Middle Initial)			Data of Danairi
В.	Edward Stack Mailing Address 4318 Sunny Lake Drive			Date of Receipt
	Mailing Address 4318 Sunny Lake Drive			09 15 2006
	City	State	Zip Code	Transaction ID: AEFYWY335372
	Hartland	MI	48353-1430	Amount of Each Receipt this Period
	FEC ID number of contributing			265.00
	federal political committee.	C		365.00
	Name of Employer	Occupation	า	Batch Tool - PAC
	self	Ophthalm		
	Receipt For:		Year-to-Date ▼	
	Primary General		205.00	1
	Other (specify)		365.00	
C.	Full Name (Last, First, Middle Initial) James Sutton			Date of Receipt
	Mailing Address 3631 Bienville Boulevard	<u> </u>		M M / D D / Y Y Y Y
				09 21 2006
	City	State	Zip Code	Transaction ID: G9TGYC860362
	Ocean Springs	MS	39564-5702	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1000.00
	federal political committee.			
	Name of Employer	Occupation	1	Batch Tool - PAC
	self	Ophthalm		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	1000.00] [
	Other (specify) ▼	0 0	1.000.00	1
	JBTOTAL of Receipts This Page (optional)			2365.00
۳	TOTAL OF Necepts This Page (optional)			

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the na	ements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Ali Tabassian Mailing Address 8700 Stony Point Parkway Suite City State			Zip Code	Date of Receipt 0 9 0 7 2 0 0 6 Transaction ID: AEFNA2617557
	Richmond FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Amount of Each Receipt this Period 365.00 Batch Tool - PAC
3.	Full Name (Last, First, Middle Initial) Sharon Taylor Mailing Address 5900 Corporate Drive Sui City	ite 150 State	Zip Code	Date of Receipt M M M D D D P P P P P P P
	Pittsburgh FEC ID number of contributing federal political committee.	PA C	15237-7005	Amount of Each Receipt this Period 300.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Batch Tool - PAC
- .	Full Name (Last, First, Middle Initial) Edmond Thall Mailing Address 1266 E Sherman Bouleva	ard		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: AEFV3S461252
	Muskegon FEC ID number of contributing federal political committee.	C	49444-1847	Amount of Each Receipt this Period 365.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Batch Tool - PAC
s	UBTOTAL of Receipts This Page (optional)			1030.00
Т	OTAL This Period (last page this line number onl	v)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 55 / 85
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology			
Full Name (Last, First, Middle Initial) Vance Thompson			Date of Receipt
Mailing Address 1310 W 22nd Street			09 / 12 / 2006
City <u>Sioux Falls</u>	State SD	Zip Code 57105-1501	Transaction ID: AEFV56485187 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Charles Thornton			Date of Receipt
Mailing Address 2931 Richmond Road			09 16 2006
City	State	Zip Code	Transaction ID: 03842-79714602231980
Texarkana	TX	75503-2125	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00 PAC 2nd of 4
Name of Employer self	Occupatio Ophthalr		PAC 2110 01 4
Receipt For:	<u>-</u> -	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Robert Tucker			Date of Receipt
Mailing Address 9650 Ventana Way Sui	te 101		09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: AEFNA2161827
Alpharetta	GA	30022-6395	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00 Batch Tool - PAC
Name of Employer self	Occupatio Ophthalr		Batti 1001-1 AO
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1000.00
TOTAL This Period (last nage this line number of	nnly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 56 / 85
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIVIIZED NEOEII 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Statem	ents may	not be sold or used by any perso	
or	for commercial purposes, other than using the name	e and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Academy of Ophthalmology Inc I	Political	Committee (OPHTHPAC)	_
A.	Full Name (Last, First, Middle Initial) Lyda Tymiak			Date of Receipt
	Mailing Address 2650 Tampa Road			09 06 2006
	City	State	Zip Code	Transaction ID: AEFLVO872750
	Palm Harbor	FL	34684-3144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer O	ccupation	<u> </u>	Batch Tool - PAC
	colf	•	nologist	
		•	Year-to-Date ▼	
	Primary General		005.00	1
	Other (specify) ▼		365.00	
<u> </u>	Full Name (Last, First, Middle Initial) Peter Utrata			Date of Receipt
	Mailing Address 262 Neil Avenue Suite 320			09 25 2006
	City	State	Zip Code	Transaction ID: G9TNDI115126
	Columbus	OH	43215-7311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C ;		365.00
	Name of Employer O	ccupation	1	Batch Tool - PAC
	self	phthaln	nologist	
		ggregate	Year-to-Date ▼	
	Primary General		365.00	
	Other (specify) ▼	0 0		
C.	Full Name (Last, First, Middle Initial) Ted Wei			Date of Receipt
	Mailing Address 616 N Garfield Avenue Suit	te 305		09 08 2006
	City	State	Zip Code	Transaction ID: AEFOF3374205
	Monterey Park	CA	91754-1101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	colf	ccupation ohthaln	n nologist	Batch Tool - PAC
		•	Year-to-Date ▼	
	Primary General	1 1	500.00	1
	Other (specify)	0 0	500.00	
s	UBTOTAL of Receipts This Page (optional)			1230.00
F				
т	OTAL This Period (last page this line number only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 85 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I	nc Politica	I Committee (OPHTHPAC)	
<u>΄</u> Α.	Full Name (Last, First, Middle Initial) Thomas Weiss			Date of Receipt
	Mailing Address 4701 N Meridian Avenue	e Suite 202	2	09 12 2006
	City Miami Beach	State FL	Zip Code 33140-2910	Transaction ID: 03842-24168032407760 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer self	Occupatio Ophthalr		PAC 3rd of 4
	Receipt For: Primary General Other (specify) ▼	<u> </u>	e Year-to-Date ▼ 375.00	
— В.	Full Name (Last, First, Middle Initial) Barry Welch			Date of Receipt
	Mailing Address 721 Sheridan Avenue S	uite 280		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State WY	Zip Code	Transaction ID: 03842-46084231138229
	Cody FEC ID number of contributing federal political committee.	C	82414-3439	Amount of Each Receipt this Period 300.00
	Name of Employer self	Occupatio Ophthalr		PAC 3rd of 4
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 900.00	
<u> </u>	Full Name (Last, First, Middle Initial) Robert Werner			Date of Receipt
	Mailing Address 330 Straight Street Suite	e 201		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Cincinnati	State OH	Zip Code 45219-1067	Transaction ID: G9TNDI362326 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10210	250.00
	Name of Employer self	Occupatio Ophthalr	nologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			675.00
T	OTAL This Period (last page this line number o	nly)		

S	CHEDULE A (FEC Form 3X)		Lise separate schodulo(s)	FOR LINE NUMBER: PAGE 58 / 85
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I	nc Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Robert Whitaker Mailing Address 2021 N Macarthur Boule	evard Suite	1	Date of Receipt 0 9 2 5 2 0 0 6
	City Irving	State TX	Zip Code 75061-2210	Transaction ID: G9TNDI267206 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer self Receipt For:	Occupation		Batch Tool - PAC
	Primary General Other (specify) ▼	Aggregate	365.00	
3.	Full Name (Last, First, Middle Initial) Stephen Whiteside			Date of Receipt
	Mailing Address 5303 Winrock Circle			09 / 27 / 2006
	City	State	Zip Code	Transaction ID: FBY4Z7N8QT9G4
	Temple	TX	76502-8812	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 PACWEB GENERATED CONTRIBU-
	Name of Employer self	Occupation Ophthaln		TION
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Robert Williams			Date of Receipt
	Mailing Address 1169 Eastern Parkway S	Suite 3334		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: FBYAHV1WPT9G1
	Louisville	KY	40217-1415	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00 PACWEB GENERATED CONTRIBU-
	Name of Employer self	Occupation Ophthaln	nologist	TION
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)		·····	1865.00
T	OTAL This Period (last page this line number or	nly)		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 59 / 85
	•	coo coparato concacio(c)		(check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Guillinary Fage	13 14 15 16 17
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology	Inc Political	Committee (OPHTHPAC)	
Α.	Full Name (Last, First, Middle Initial) Martyn Wills			Date of Receipt
	Mailing Address 211 N Eddy Street			09 07 2006
	City	State	Zip Code	Transaction ID: AEFNA2921818
	South Bend	IN	46617-2808	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthalm		PAC 4th of 4
	Receipt For:		Year-to-Date ▼	\dashv
	Primary General	7.99.094.0		1
	Other (specify) ▼		750.00	
				4
В.	Full Name (Last, First, Middle Initial) Donald Wilson			Date of Receipt
	Mailing Address 201 Pennsylvania Park	way		09 01 2006
	City	State	Zip Code	Transaction ID: AEFEAO224819
	Indianapolis	IN	46280-2301	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	500.00
	federal political committee.	C		500.00
	Name of Employer	Occupation	<u> </u>	Batch Tool - PAC
	self	Ophthalm		
	Receipt For:	<u> </u>	Year-to-Date ▼	_
	Primary General			1
	Other (specify) ▼	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Alyson Yashar			Date of Receipt
	Mailing Address 21 Arrowhead Lane			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: AEFLVO328293
	Saddle River	NJ	07458-2503	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	
	Primary General		205.00	1
	Other (specify) ▼		365.00	
_				
				4445.00
s	UBTOTAL of Receipts This Page (optional)			1115.00
\vdash				-

TOTAL This Period (last page this line number only)

Carol Ziel

City

Mailing Address

Winston Salem

Name of Employer self

Primary

Receipt For:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

General

federal political committee.

Other (specify)

C

Aggregate Year-to-Date ▼

730.00

FOR LINE NUMBER: PAGE 60 / 85 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Date of Receipt 2025 Frontis Plaza Boulevard Suite 09 29 2006 McKinley and Ziel Ophthalmology State Zip Code Transaction ID: G9TTW2683557 NC 27103-5663 Amount of Each Receipt this Period 730.00 Batch Tool - PAC Occupation Ophthalmologist

SUBTOTAL of Receipts This Page (optional)	•	730.00
TOTAL This Period (last page this line number only)	<u> </u>	65015.83

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 85 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	s may not be sold or used by any perso d address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Poli	itical Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Union Bank Mailing Address 400 California Street City State San Francisco CA FEC ID number of contributing	e Zip Code 94104	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Name of Employer Occup	pation egate Year-to-Date ▼ 504.15	53.65 MM interest 9/06

SUBTOTAL of Receipts This Page (optional)	•	53.65
TOTAL This Period (last page this line number only)	•	53.65

Image# 26930471501

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 62/85
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one) 22 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and Sta for commercial purposes, other than using the na			
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
	American Academy of Ophthalmology I	nc Political Committee (OPH)	THPAC)	
	Full Name (Last, First, Middle Initial)			Transaction ID: 3362630610125694180
۹.	Union Bank			Date of Disbursement
	Mailing Address 400 California Street			09
	City _	State Zip Code		Amount of Each Disbursement this Period
	San Francisco	CA 94104		1107.00
	Purpose of Disbursement Bank charges 9/06			1107.92
	Candidate Name		Category/ Type	
	Office Sought: House Disbu	rsement For:		
	Senate	Primary General		
	President	Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	1107.92
TOTAL This Period (last page this line number only)	•	1107.92

<u>ا</u> ر	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)		E NUMBE	R:	P	AGE 63	/ 85
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check or 21b 27	22 28a	X 23 28b	24 28c	25 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name								
\rangle	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc								-
۹.	Full Name (Last, First, Middle Initial) A Whole Lot of People for Grijalva Congres Mailing Address PO Box 1242	ssnl Cmte				of Disburs		3060905 Ý Ž 0 Č	5359175
	,	State Zip Code AZ 85702			Amou	unt of Each	n Disburs	ement this	s Period
	Purpose of Disbursement 2006 General				L.			2000	0.00
	Candidate Name Grijalva Raul			tegory/ ype					
	Office Sought: X House Disburse Senate President State: AZ District: 07	ment For: 2006 Primary X General Other (specify)							
3.	Full Name (Last, First, Middle Initial) Andrews for Congress Committee					saction ID of Disburs		0060905	5281028
	Mailing Address 215 Fourth Avenue Suite 200				0 ^M 9	M / D	06 /	žoó	6 Y
	City	State Zip Code NJ 08035			Amou	unt of Each	n Disburs		
	Purpose of Disbursement 2006 General							2000	0.00
	Candidate Name Andrews Robert			tegory/ Type					
	Office Sought: X House Senate President State: NJ District: 01	ment For: 2006 Primary X General Other (specify) ▼							
D .	Full Name (Last, First, Middle Initial) Anna Eshoo for Congress					saction ID of Disburs		7060905	5329461
	Mailing Address 555 Capitol Mall Suite 14	25			o ^M 9	M / D	06 /	y žoó	6 Y
	,	State Zip Code CA 95814			Amou	unt of Eacl	n Disburs	ement this	s Period
	Purpose of Disbursement 2006 General				T L.			2500	0.00
	Candidate Name Eshoo Anna			tegory/ Type					
	Office Sought: X House Senate President State: CA District: 14	ment For: 2006 Primary X General Other (specify)							
S	UBTOTAL of Disbursements This Page (optional) .			•				6500	0.00
T	OTAL This Period (last page this line number only)			•					

		Use seperate schedule(s)		Check ({ :		PAG	iE 64 / 8	35	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27		22 28a	X 23 28b		24 28c	25 29	\Box	26 30b
	y Information copied from such Reports and Statem										s	
Or I	for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political	COITIF	muee to	SUIIC	ii CONTRI	JULIONS	HOIH S	ucii col	mmuee		
	American Academy of Ophthalmology Inc	Political Committee (OP	HTH	PAC)								
	Full Name (Last, First, Middle Initial)									609055	3175	547
٦.	Becerra for Congress					Date of			nt	V . V	V	
	Mailing Address PO Box 261060					0 9]	06	Ĺ	žoŏe	5	
	•	State Zip Code CA 90026				Amoun	t of Ead	ch Dist	oursem	ent this F	Period	t
	Purpose of Disbursement	J0020								2000.0	00	
	2006 General		L									
	Candidate Name Becerra Xavier			tegory/ ype								
	Office Sought: X House Disburse Senate	ment For: 2006 Primary X General										
	President	Other (specify)										
	State: CA District: 31											
3	Full Name (Last, First, Middle Initial) Ben Cardin for Senate									309055	2278	398
•	Ben Cardin for Senate					Date of			it / Y	YY	Υ	
	Mailing Address PO Box 21093					0 9	J L	0 6	Ĺ	žoŏe		
	•	State Zip Code MD 21228				Amoun	t of Ead	ch Dist	oursem	ent this F	Period	t
	Purpose of Disbursement	21220								2500.0	00	
	2006 General		L									
	Candidate Name Cardin Benjamin			tegory/ ype								
		ment For: 2006										
	X Senate President	Primary X General Other (specify) ▼										
	State: MD District: 00	Ctrici (specify)										
Э.	Full Name (Last, First, Middle Initial) Berkley for Congress					Transa Date of				609055	2779	965
						0 9 M			/ Y	žoŏe	Y	
	Mailing Address 3069 Conquista Court					-						
		State Zip Code NV 89121				Amoun	t of Ead	ch Dist	oursem	ent this F	erio	d —
	Purpose of Disbursement 2006 General									2500.0	00	
	Candidate Name Berkley Shelley			tegory/ ype								
	Office Sought: X House Disburse	ment For: 2006										
	Senate	Primary X General										
	State: NV District: 01	Other (specify)										
										7000	٠	$\overline{}$
S	UBTOTAL of Disbursements This Page (optional)			•	-	<u></u>				7000.0	JU .	_
T	OTAL This Period (last page this line number only)			•	•	L						

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check				P	AGE 6	5 / 85	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b		22 X 28a	23 28b	24 28c	\vdash	25 29	26 30b
Any Information copied from such Reports and Stater									
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e anu auuress or any political co	Jillillillee (0	SUICIL	JOHENDU	uons m	JIII SUCI	COMMIT	ıee	
American Academy of Ophthalmology Inc	Political Committee (OPH	THPAC)							
Full Name (Last, First, Middle Initial)			Т	ransact	ion ID:	487468	306090)5527	0032
Boren for Congress 2006				ate of D			V V	V	1
Mailing Address PO Box 1924			I.	0 9	0	6 /	20	ŏ6 [°]	
City Muskogee	State Zip Code OK 74401		Α	mount o	of Each	Disburse	ement tl	nis Pei	riod
Purpose of Disbursement	OK /4401		. [15	00.00	
2006 General			'						
Candidate Name Boren David		Category/ Type							
Office Sought: X House Disburs Senate President	ement For: 2006 Primary X General Other (specify)								
State: OK District: 02	Other (specify)								
Full Name (Last, First, Middle Initial)			т	ransact	ion ID:	516741	106090)5524	8383
Boucher for Congress Committee				ate of D	isburse	ement			
Mailing Address PO Box 2000				0 9	0	6	žo	ŏ6 [°]	
City Abingdon	State Zip Code VA 24212		Δ	mount o	of Each	Disburse			
Purpose of Disbursement 2006 General			l l				25	00.00	
Candidate Name Boucher Rick		Category/ Type							
Office Sought: X House Disburs Senate President	ement For: 2006 Primary X General Other (specify)								
State: VA District: 09									
Full Name (Last, First, Middle Initial) Charles A Gonzalez Congressional Camp	aign			ransact ate of D		155421 ement	106090)5525	3550
Mailing Address PO Box 12612			[0 9	′ D0	6 /	žo	ŏ 6 °	
City San Antonio	State Zip Code TX 78212		Δ	mount o	of Each	Disburse	ement tl	nis Pei	riod
Purpose of Disbursement 2006 General			L		-		15	00.00	
Candidate Name Gonzalez Charles		Category/ Type	'						
Office Sought: X House Senate President State: TX District: 20	ement For: 2006 Primary X General Other (specify)								
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NAME OF COMMITTEE (In Full)												
American Academy of Ophthalmology Inc	Political Committee (OPH	THF	PAC)									
Full Name (Last, First, Middle Initial)				-	Transa	ction	ı ID: (089467	060	91944	470)23
Chocola for Congress Inc					Date of	_			,	V	V	
Mailing Address PO Box 6728					0 9] [^D 1	9 ′	2	0 Ó 6		
City	State Zip Code				Amoun	t of E	ach I	Disburse	men	t this P	erio	b
South Bend Purpose of Disbursement	IN 46660								1	000.0	00	П
2006 General					-		-		-			_
Candidate Name Chocola Chris			egory/ /pe									
	ement For: 2006											
Senate President	Primary X General Other (specify) ▼											
State: IN District: 02	canon (openity)											
Full Name (Last, First, Middle Initial)				-	Transa	ction	ı ID:	518326	060	90552	2865	 597
3. Cleaver for Congress					Date of	Disb	urse	ment				
Mailing Address 4801 Main Street Stuite	1000				0 9	<u> </u>	0	6 /	ž	0 Ď 6	Y	
City Kansas City	State Zip Code MO 64112				Amoun	t of E	ach I	Disburse	emen	t this P	erio	t
Purpose of Disbursement 2006 General									. 1	0.000	00	
Candidate Name Cleaver Emanuel			egory/ /pe									
Senate President	ement For: 2006 Primary X General Other (specify)											
State: MO District: 05 Full Name (Last, First, Middle Initial)				-								
Cooper for Congress Committee					Date of	Disb	urse	421442 ment) 57
Mailing Address PO Box 927					0 9	<u></u>	0	6 /	Ź	0 Ď 6	1	
City Brentwood	State Zip Code TN 37024				Amoun	t of E	ach I	Disburse				t
Purpose of Disbursement 2006 General		•							. 2	2000.0	00	_
Candidate Name Cooper Jim			egory/ /pe									
Senate President	ement For: 2006 Primary X General Other (specify)											
State: TN District: 05												
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\rangle	American Academy of Ophthalmology Inc	Political Committee (OP	HTH	PAC)								
	Full Name (Last, First, Middle Initial)							: 78925	2060	90551	813	25
٦.	Cubin for Congress Inc						Disburs		v · v	V .	V	
	Mailing Address Post Office Box 4657 PO Box 4657					0 9]	o 6 /	2	0 0 6		
	City Casper	State Zip Code WY 82604				Amoun	t of Each	n Disburs	emen	t this P	erioc	d L
	Purpose of Disbursement 2006 General	02301							4	0.000	0	
	Candidate Name Cubin Barbara			tegory/								
	Office Sought: X House Senate President State: WY District: 01	ement For: 2006 Primary X General Other (specify)	<u>'</u>	урс								
	Full Name (Last, First, Middle Initial)							. 00400	4000	00550	4.40	
3.	Diana Degette for Congress Inc.						Disburs					319
	Mailing Address PO Box 61337					0 9) [']	06 /	Ż	0 Ď 6	T	
	City Denver	State Zip Code CO 80206				Amoun	t of Each	n Disburs	-		-	<u> </u>
	Purpose of Disbursement 2006 General					L.			. 1	500.0	0	
	Candidate Name DeGette Diana			egory/ ype								
	Office Sought: X House Disburs Senate President	ement For: 2006 Primary X General Other (specify)										
	State: CO District: 01											
С.	Full Name (Last, First, Middle Initial) Doyle for Congress Committee						Disburs		7060	90552	2616	10
	Mailing Address 205 Hawthorne Court 2227 Hampton Street					0 9	/ D	06 /	Ý Ž	0 Ď 6	Y	
	City Pittsburgh	State Zip Code PA 15221				Amoun	t of Each	n Disburs	-		-	d T
	Purpose of Disbursement 2006 General								2	2500.0	0	
	Candidate Name Doyle Mike			egory/ ype								
	Office Sought: X House Senate President State: PA District: 14	ement For: 2006 Primary X General Other (specify)										
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`	American Academy of Ophthalmology Inc	Political C	ommittee (OPI	HTH	PAC)									
	Full Name (Last, First, Middle Initial)						Transa	action	ı ID: (367153	3060	90553	046	60
٦.	Dutch Ruppersberger for Congress						Date o	_			v · v	V	V	
Ī	Mailing Address 22 West Padonia Road S	Suite C-141	1				0,0	, ,	0	6	2	0 Ď 6		
	,	State MD	Zip Code 21093				Amour	nt of E	ach [Disburse	emen	t this P	erioc	t
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2	2006 General			L										
	Candidate Name Ruppersberger C.A.				egory/ ype									
•	Office Sought: X House Disburse Senate	ment For: Primary	2006 X General											
	President	Other (spec												
	State: MD District: 02													
_	Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress									038982	2060	92762	2578	320
	Earl Formerby for Congress						Date o	_			ΥΥ	Y	Υ	
!	Mailing Address PO Box 9336						0 9		^D 2	8	2	0 Ď 6		
	,	State ND	Zip Code 58106				Amour	nt of E	ach [Disburse	emen	t this P	erioc	t
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	2006 General Candidate Name				/									
	Pomeroy Earl				egory/ ype									
-		ment For:	2006											
	Senate President	Primary Other (spec	X General											
;	State: ND District: 01	other (oper	on <i>y)</i> ₩											
_	Full Name (Last, First, Middle Initial)									791001	060	90552	724	180
<i>J</i> .	Engel for Congress						Date o	_			Y Y	Y	Υ	
	Mailing Address 462 California Road						0 9		0	6	2	0 Ó 6		
		State NY	Zip Code 10708				Amour	nt of E	ach [Disburse	emen	t this P	erioc	t
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	Candidate Name Engel Eliot				tegory/									
Ī		ment For:	2006		-									
	Senate President	Primary	X General											
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NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	· ·					
Full Name (Last, First, Middle Initial) Fattah for Congress			Transaction Date of Disb	ID: 8656220 ursement	6090552 Ž 0 Ď 6	_
Mailing Address 3900 Ford Road Suite 12	-0		0 9	0.6	2006	
,	State Zip Code PA 19131		Amount of E	ach Disbursem	ent this P	eriod
Purpose of Disbursement 2006 General		•			2000.0	0
Candidate Name Fattah Chaka		Category/ Type				
Office Sought: X House Disburse Senate President State: PA District: 02	ment For: 2006 Primary X General Other (specify)					
Full Name (Last, First, Middle Initial) Feinstein for Senate			Transaction Date of Disb	ID: 5719560	6092762	50971
Mailing Address 601 S Glenoaks Bouleva	d #211		09 /	D 2 8 / Y	ž 0 0 6	Y
,	State Zip Code CA 91502		Amount of E	ach Disbursem		-
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Candidate Name Feinstein Dianne		Category/ Type				
Office Sought: House X Senate President State: CA Disburse	ment For: 2006 Primary X General Other (specify) ▼					
Full Name (Last, First, Middle Initial) Feinstein for Senate			Transaction Date of Disb	ID: 7354100	6090552	30333
Mailing Address 601 S Glenoaks Bouleva	rd #211		09 /	0 6 Y	^y 0 0 6	Y
,	State Zip Code CA 91502		Amount of E	ach Disbursem	ent this P	eriod
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Candidate Name Feinstein Dianne		Category/ Type				
Office Sought: House Disburse X Senate President State: CA District: 00	ment For: 2006 Primary X General Other (specify)					
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American Academy of Ophthalmology In	Political Committee (OPH	THPAC)					
Full Name (Last, First, Middle Initial)				tion ID: 0138	4706090)5519688	<u> </u>
Friends of Clay Shaw				Disbursement	V · V ·	V V	
Mailing Address PO Box 2188 2600 NE 14Th. Street C	auseway		0 9	06	20	Ď 6 Ť	
City Fort Lauderdale	State Zip Code FL 33303		Amount	of Each Disbu	irsement th	nis Period	
Purpose of Disbursement	1L 33303				50	00.00	1
2006 General							
Candidate Name Shaw E.		Category/ Type					
Senate	ement For: 2006 Primary X General						
State: FL District: 22	Other (specify)						
Full Name (Last, First, Middle Initial)			Transact	tion ID: 2027	2106000	05500563	
Friends of Cliff Stearns				Disbursement)4
Mailing Address PO Box 308			0.8	06	20	0 6	
City Silver Springs	State Zip Code FL 34489		Amount	of Each Disbu			_
Purpose of Disbursement 2006 General					500	00.00	_
Candidate Name Stearns Clifford		Category/ Type					
Office Sought: X House Senate President Disbure	ement For: 2006 Primary X General Other (specify)						
State: FL District: 06							
Full Name (Last, First, Middle Initial) Friends of Corrine Brown				tion ID: 8027 Disbursement	'1206090)5531264	1 6
Mailing Address 3109 River Bend Court	D-102		0 9	06	y žo	0 6 °	
City Laurel	State Zip Code MD 20724		Amount	of Each Disbu	ırsement th	nis Period	_
Purpose of Disbursement 2006 General		•			200	00.00	_
Candidate Name Brown Corrine	-	Category/ Type					
Office Sought: X House Disburs Senate President State: FL District: 03	ement For: 2006 Primary X General Other (specify)						
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	American Academy of Ophthalmology Inc I	Political Committee (OP	HTH	PAC)									
	Full Name (Last, First, Middle Initial)					Transac	tion ID:	634008	3060	90553	227	<u></u> 27	
٩.	Friends of Dennis Cardoza					Date of 0 9			v v	V .	V		
	Mailing Address 555 Capitol Mall Suite 1425						ا ا ا	6 /	2	0 Ď 6			
	•	State Zip Code CA 95814				Amount	of Each	Disburse	emen	t this P	eriod		
	Purpose of Disbursement	93014							1	000.0	0	7	
	2006 General												
	Candidate Name Cardoza Dennis			egory/ ype	y/								
	Office Sought: X House Disburse Senate	ment For: 2006 Primary X General											
	President	Other (specify)											
	State: CA District: 18	· ·											
3.	Full Name (Last, First, Middle Initial)							536522	2060	92762	604	17	
•	Friends of Ginny Brown-Waite					Date of			ΥΥ	Y	Υ		
	Mailing Address 704 Ponce De Leon Boulevard					0 9	2	28	2	0 Ď 6			
	•	State Zip Code FL 34601				Amount	of Each	Disburse	emen	t this P	eriod		
	Purpose of Disbursement								2	500.0	0		
	2006 General												
	Candidate Name Category/ Brown-Waite Virginia Type												
	Office Sought: X House Disburse	ment For: 2006											
	Senate President	Primary X General											
	State: FL District: 05	Other (specify)											
_	Full Name (Last, First, Middle Initial)							861135	5060	90551	908	78	
٠.	Friends of Joe Pitts						Disburse		Y Y	Y	Υ		
	Mailing Address PO Box 775						0	6 /	2	0 Ó 6			
		State Zip Code PA 19375				Amount	of Each	Disburse	emen	t this P	eriod	_	
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	Candidate Name Pitts Joseph												
	Office Sought: X House Disburse	ment For: 2006											
	Senate President	Primary X General											
	State: PA District: 16	Other (specify)											
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<u> </u>	NAME OF COMMITTEE (In Full)												
\rangle	American Academy of Ophthalmology Inc	Political Committee (OPI	НТН	PAC)									
	Full Name (Last, First, Middle Initial)					Transa	actio	n ID:	586871	060	90553	3204	116
٩.	Friends of Lois Capps					Date o	f Dis			· · · · · ·	V	V	
	Mailing Address PO Box 23940					0 9	,	0	6 /	. 2	0 Ó 6		
	City	State Zip Code				Amour	nt of	Each	Disburse	emen	t this F	erio	d
	Santa Barbara Purpose of Disbursement	CA 93121								2	2500.0	0	
	2006 General								-				
	Candidate Name Capps Lois			egory/ ype									
		ement For: 2006											
	Senate President	Primary X General Other (specify) ▼											
	State: CA District: 23	Caron (opening)											
_	Full Name (Last, First, Middle Initial)					Transa	actio	n ID:	511362	2060	90553	3100	360
პ .	· Gutierrez for Congress					Date o							
	Mailing Address 2846 North River Walk Drive					0 9	/	^D 0	6 /	ž	0 Ď 6	Y	
	City Chicago	State Zip Code IL 60618				Amour	nt of	Each	Disburse	emen	t this F	erio	d
	Purpose of Disbursement 2006 General									2	2000.0	00	
	Candidate Name Gutierrez Luis			egory/ ype									
	Senate President	ement For: 2006 Primary X General Other (specify)											
	State: IL District: 04 Full Name (Last, First, Middle Initial)												
Э.	Heather Wilson for Congress					Date o	f Dis		239446 ment				357
	Mailing Address PO Box 14070					0 9		້2	8 /	2	0 Ď 6		
	City Albuquerque	State Zip Code NM 87191				Amour	nt of	Each	Disburse			-	d
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	Candidate Name Wilson Heather												
	Senate President	ement For: 2006 Primary X General Other (specify)											
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Full Name (Last, First, Middle Initial)				Т	ransac	ction ID:	767005	060	90552	2587	750
Herseth for Congress						Disburs				V	
Mailing Address PO Box 2009					0 9	/ L b	6 /	ž	0 0 6	Y	
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Sioux Falls	SD 57101			4 [•		2	2500.0	nn .	
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Candidate Name Herseth Stephanie			egory/ ype								
Office Sought: X House Disburse	ment For: 2006										
Senate	Primary X General										
State: SD District: 01	Other (specify)										
Full Name (Last, First, Middle Initial)				+-	•	ID	100100		00556	0070	
Hooley for Congress					Date of	Disburs		v • v	V *	V	362
Mailing Address PO Box 2050					0,8 ,	l C	6 /	. Ż	0 0 6	_	
,	State Zip Code OR 97308			A	Amount	of Each	Disburse	-		-	t
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Candidate Name Hooley Darlene			egory/ /pe								
Senate President	ment For: 2006 Primary X General Other (specify) ▼										
State: OR District: 05 Full Name (Last, First, Middle Initial)											
Inslee for Congress					Date of	Disburs	: 865457 ement)63
Mailing Address PO Box 33027] I	0 9	/ DC	6 /	Ż	0 Ď 6	1	
,	State Zip Code WA 98133			<i>A</i>	Amount	of Each	Disburse	-		-	t
Purpose of Disbursement 2006 General]				2	2500.0	00	
Candidate Name Inslee Jay			egory/ /pe								
Senate President	ment For: 2006 Primary X General Other (specify) ▼										
State: WA District: 01											
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	American Academy of Ophthalmology Inc	Political Committee (OP	HTH	PAC)								
	Full Name (Last, First, Middle Initial)					Transa	ction ID	: 256170	6060	91342	2535	32
٠.	Jeb Bradley for Congress						Disburs		V • V		V	
	Mailing Address 645 South Main Street					0 ^M 9 M] / [] .	1 3 [/]	<u>'</u> 2	0 Ď 6		
	•	State Zip Code				Amoun	t of Each	n Disburs	emen	t this P	erioc	t
	Wolfeboro Purpose of Disbursement	NH 03894	_						2	2500.0	0	
	2006 General					-		-	-	-	-	
	Candidate Name Bradley Joseph			egory/ ype								
	9 1	ement For: 2006 Primary X General										
	Senate President	Primary X General Other (specify) ▼										
	State: NH District: 01											
-	Full Name (Last, First, Middle Initial)							: 256492	2060	91341	895	93
٠.	Jim Jordan for Congress					Date of	Disburs		v · v		V	
	Mailing Address 1709 State Route 560 S					0 9] / [] .	1 3 /	<u>'</u> 2	0 Ó 6		
	•	State Zip Code OH 43078				Amoun	t of Each	n Disburs	emen	t this P	erioc	d t
	Purpose of Disbursement	On 43076							2	2500.0	0	
	2006 General											
	Candidate Name Jordan James			egory/ ype								
	Office Sought: X House Disburse Senate	ment For: 2006 Primary X General										
	President	Other (specify)										
	State: OH District: 04	, (1 <i>)</i> / •										
Э.	Full Name (Last, First, Middle Initial) John D. Dingell for Congress Committee						ction ID Disburs	: 21376	4060	90552	928	396
						M M	_	0 6 /	YYY	0 Ď 6	Υ	
	Mailing Address 607 14th Street Northwes Suite 800					0 9						
	•	State Zip Code DC 20005				Amoun	t of Each	n Disburs	emen	t this P	erioc	i T
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	Candidate Name Dingell John			egory/ ype								
		ment For: 2006										
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	State: MI District: 15	Other (specify)										
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	cial purposes, other than using the na										•	
NAME OF	COMMITTEE (In Full)											
Americar	n Academy of Ophthalmology Ir	c Political Committee (OF	HTH	PAC)								
•	(Last, First, Middle Initial)				Т	ransac	tion ID:	908836	0609	90552	2077	 721
	for Congress Committee					м м	Disburse	ement	ΥΥΥ	2 Y 2	Υ	
Mailing Ad	dress PO Box 1986				L	0 9	0	6	. 2	0 Ó 6		
City New Brita	ain	State Zip Code CT 06050			A	mount	of Each	Disburse	ement	this P	erio	Ł
Purpose of 2006 Gene	f Disbursement eral				7 L				2	000.0	0	
Candidate Johnson				egory/ ype								
Office Sou		rsement For: 2006		700	-							
	Senate President	Primary X General Other (specify) ▼										
State: CT	District: 05											
_	(Last, First, Middle Initial)							043211	060	90552	2032	282
- Keller for	Congress					ate of	Disburse		v * v	V	V	
Mailing Ad	dress PO Box 1453					0,8 ,,	່	0 6 / T	. ż	0 0 6	_	
City Orlando		State Zip Code FL 32802			A	mount	of Each	Disburse	ement	this P	erio	t
Purpose of 2006 Gene	f Disbursement eral] [2	000.0	0	
Candidate Keller Ric				egory/ ype								
Office Sou	Senate President	sement For: 2006 Primary X General Other (specify)										
State: FL	District: 08											
•	(Last, First, Middle Initial) Congress Committee						tion ID: Disburse	: 392417 ement	'060	90552	2383	346
Mailing Ad	dress 205 South 5th Avenue Suite 428				[0 9	[′] 0	6 /	ž	0 Ď 6	Y	
City La Cross		State Zip Code WI 54601			A	mount	of Each	Disburse	ement	this P	erio	t
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Candidate Kind Ron				egory/ ype								
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`	American Academy of Ophthalmology Inc	Political Committee (OP	нтн	PAC)								
۸.	full Name (Last, First, Middle Initial)					Transa	ction IE) : 64545	8060	91944	408	46
1.	Kuhl for Congress						f Disburs		V • V		V	
N	Mailing Address 10 Ganesvoort Street Suite 101					0 9		19 /	2	0 0 6		
	City Bath	State Zip Code NY 14810				Amoun	nt of Eac	h Disburs	emen	t this P	erioc	1
_	Purpose of Disbursement	14010							2	2000.0	0	
2	2006 General											
ŀ	Candidate Name Kuhl John			tegory/ ype								
C	Office Sought: X House Disburse Senate	ement For: 2006 Primary X General										
	President	Other (specify)										
	State: NY District: 29											
-	Full Name (Last, First, Middle Initial) McCrery for Congress Committee						ction IE	D: 03366	0060	90552	230	43
_	, ,					M M			Y Y	Y .	Υ	
_	Mailing Address Post Office Box 52956 333 Texas Street Suite 1					0 9		06 /	. 2	0 Ó 6		
	City Shreveport	State Zip Code LA 71135				Amoun	nt of Eac	h Disburs	emen	t this P	erioc	1
F	Purpose of Disbursement								2	2500.0	0	
_	2006 General Candidate Name		Co	togon/								
	AcCrery Jim			tegory/ ype								
C	3 1	ement For: 2006										
	Senate President	Primary X General Other (specify)										
5	State: LA District: 04	Other (specify)										
_	Full Name (Last, First, Middle Initial) Michaud for Congress						action IE f Disburs	D: 85315	1060	90552	957	'86
_					4	0 9 M	_		YYY	0 0 6	Υ	
_	Mailing Address 213 Lisbon Street											
	City Lewiston	State Zip Code ME 04240				Amoun	nt of Eac	h Disburs	emen	t this P	erioc	1
	Purpose of Disbursement								2	2000.0	0	
	Candidate Name Michaud Michael			tegory/ ype								
C	Office Sought: X House Disburse	ement For: 2006		,,								
	Senate	Primary X General										
5	President State: ME District: 02	Other (specify)										
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or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political co	minutee to s	SONCIL CONTINE	outions if	nii Sucii C	ommulee	
American Academy of Ophthalmology Inc I	Political Committee (OPH	THPAC)					
Full Name (Last, First, Middle Initial)						0609055	363619
A. Mike Ross for Congress Committee				Disburse		VV	V
Mailing Address PO Box 360			0 9	0	6 / Y	ž 0 ŏ 6	5
	State Zip Code AR 71857		Amoun	t of Each	Disburse	ment this F	Period
Purpose of Disbursement	7 1007		- []			2500.0	00
2006 General							
Candidate Name Ross Mike		Category/ Type					
Office Sought: X House Disburse Senate	ment For: 2006 Primary X General						
President	Other (specify) ▼						
State: AR District: 04							
Full Name (Last, First, Middle Initial) Nathan Deal for Congress				ction ID: Disburse		06091342	265700
			M M	_	7 / Y	ž 0 Ŏ 6	Y
Mailing Address PO Box 902			0 9		3	2006	· _
,	State Zip Code GA 30503		Amoun	t of Each	Disburse	ment this F	Period
Purpose of Disbursement 2006 General		0 0				1500.0	00
Candidate Name Deal Nathan	١,	Category/ Type					
Office Sought: X House Disburse Senate President	ment For: 2006 Primary X General Other (specify)						
State: GA District: 09	candi (opeeny) V						
Full Name (Last, First, Middle Initial) - Pastor for Arizona				ction ID: Disburse		0609055	361317
Mailing Address PO Box 6554			0 9	/ DO	6 / Y	ž 0 ŏ 6	Y
,	State Zip Code AZ 85005		Amoun	t of Each	Disburse	ment this F	Period
Purpose of Disbursement 2006 General			Ī L.			2000.0	00
Candidate Name Pastor Ed	-	Category/ Type					
Office Sought: X House Senate President Disburse	nent For: 2006 Primary X General Other (specify)						
State: AZ District: 04							
SUBTOTAL of Disbursements This Page (optional) .		>				6000.0	00
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 28a 28b	24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	· · · · · · · · · · · · · · · · · · ·			
Full Name (Last, First, Middle Initial) A. People for English			Date of Disburse	
Mailing Address PO Box 1940			09 / 1	9 7 2006
,	State Zip Code PA 16507		Amount of Each	Disbursement this Period
Purpose of Disbursement 2006 General				1000.00
Candidate Name English Phil		Category/ Type		
Office Sought: X House Senate President State: PA District: 03	ment For: 2006 Primary X General Other (specify)			
Full Name (Last, First, Middle Initial) Pete Sessions for Congress 2006			Transaction ID:	: 4857110609055220024
Mailing Address Post Office Box 38585				0 6 Y 2 0 0 6 Y
,	State Zip Code		Amount of Each	Disbursement this Period
Dallas Purpose of Disbursement 2006 General	TX 75238			2500.00
Candidate Name Sessions Pete		Category/ Type		
Office Sought: X House Senate President State: TX District: 32	ment For: 2006 Primary X General Other (specify)			
Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee			Transaction ID:	: 0315110609055331970 ement
Mailing Address PO Box 8331			09 0	$\begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix}$
,	State Zip Code CA 94537		Amount of Each	Disbursement this Period
Purpose of Disbursement 2006 General		•		2000.00
Candidate Name Stark Pete		Category/ Type		
Office Sought: X House Senate President State: CA District: 13	ment For: 2006 Primary X General Other (specify) ▼			
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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	X 23		25	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
\rangle	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc							
۹.	Full Name (Last, First, Middle Initial) Peterson for Congress			Date	of Disbu	irsement		55290614
	Mailing Address 26192 Floyd Lake Point F	Road		0 ^M 9		06	ž0	06
	,	State Zip Code MN 56501		Amou	unt of Ea	ch Disburs	ement th	is Period
	Purpose of Disbursement 2006 General		•				200	0.00
	Candidate Name Peterson Collin		egory/ ype					
	Office Sought: X House Senate President State: MN District: 07	ement For: 2006 Primary X General Other (specify)						
3.	Full Name (Last, First, Middle Initial) Porter for Congress					ID: 86179	706090	55194364
	Mailing Address PO Box 26087			0 ^M 9		06	Ý Ž O	ý 6 [°]
	,	State Zip Code NV 89126		Amou	unt of Ea	ch Disburs	ement thi	is Period
	Purpose of Disbursement 2006 General		•				100	0.00
	Candidate Name Porter Jon		egory/ ype					
	Office Sought: X House Senate President State: NV District: 03	ement For: 2006 Primary X General Other (specify)						
Э.	Full Name (Last, First, Middle Initial) Price for Congress Committee					ID: 470529	906090	55283835
	Mailing Address PO Box 1986			0 ^M 9	M /	06	Ý Ž0	0 6
	,	State Zip Code NC 27602		Amou	unt of Ea	ch Disburs	ement th	is Period
	Purpose of Disbursement 2006 General		·	T L.			250	0.00
	Candidate Name Price David		egory/ ype					
	Office Sought: X House Senate President State: NC District: 04	ement For: 2006 Primary X General Other (specify)						
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	or commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and address of any politica	COITII	millee lo	SOIIC	it Contrit	Julions	s Irom :	Sucric	OHIII	iiilee		
\	American Academy of Ophthalmology Inc	Political Committee (OF	нтн	PAC)									
	Full Name (Last, First, Middle Initial)					Transa	ction	ID : 18	2819	0609	90552	754	43
۸.	Rangel for Congress					Date of			ent	· · V	V .	V	
	Mailing Address PO Box 5577 Manhattanville Station					0 9		06		2	0 ð 6		
	City New York	State Zip Code NY 10027				Amoun	t of Ea	ach Dis	burse	-		-	
	Purpose of Disbursement 2006 General									4	0.000	0	_
	Candidate Name Rangel Charles			tegory/ ype									
	Office Sought: X House Senate President State: NY District: 15	ement For: 2006 Primary X General Other (specify)											
	Full Name (Last, First, Middle Initial)					Transa	ction	ח. 70	0035	റെറ	21944	5/3	
_	Red Rooster Leadership Pac					Date of	Disbu						72
	Mailing Address 228 S Washington Stree					0 9		19		2	0 Ó 6		
	City Alexandria	State Zip Code VA 22314				Amoun	t of Ea	ch Dis	burse	-		-	
	Purpose of Disbursement 2006 Contribution									. 2	500.0	U	
_	Candidate Name			tegory/ ype									
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)											
_	Full Name (Last, First, Middle Initial) Re-Elect McGovern Committee					Transa Date of				0609	90553	073	20
	Mailing Address PO Box 60405					0 9	/	^D 0 6	/ Y	ž	0 Ď 6	Y	
	City Worcester	State Zip Code MA 01606				Amoun	t of Ea	ch Dis	burse	ment	this P	erioc	_
	Purpose of Disbursement 2006 General									. 1	0.000	0	
	Candidate Name McGovern James			tegory/ ype									
	Office Sought: X House Senate President State: MA District: 03	ement For: 2006 Primary X General Other (specify)											
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	y Information copied from such Reports and Statem or commercial purposes, other than using the name								
\rangle	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc I								
۹.	Full Name (Last, First, Middle Initial) Richard E Neal for Congress Committee				Date o	f Disburs	ement		55212821
	Mailing Address 76 Magnolia Terrace				0 9		06	žo	6
	,	State Zip Code MA 01108			Amour	nt of Each	Disburs	ement thi	s Period
	Purpose of Disbursement 2006 General		Г	•				150	0.00
	Candidate Name Neal Richard			Category/ Type					
	Office Sought: X House Senate President State: MA District: 02	ment For: 2006 Primary X Gene Other (specify) ▼	eral						
3.	Full Name (Last, First, Middle Initial) Roskam for Congress Committee					action ID:		206090	55215246
	Mailing Address 423 West Wesley Street				0 9	1 / D	06 /	žo	Ď 6 Ť
	,	State Zip Code IL 60189			Amour	nt of Each	Disburse		
	Purpose of Disbursement 2006 General				L.			250	0.00
	Candidate Name Roskam Peter			Category/ Type					
	Office Sought: X House Senate President State: IL District: 06	ment For: 2006 Primary X Gene Other (specify) ▼	ral						
Э.	Full Name (Last, First, Middle Initial) Shelley Moore Capito for Congress					action ID:		206090	55187340
	Mailing Address PO Box 11519				0 9	1 / DC	06	žo	Ď 6 Ť
		State Zip Code WV 25339			Amour	nt of Each	Disburse	ement thi	s Period
	Purpose of Disbursement 2006 General			•				300	0.00
	Candidate Name Capito Shelley			Category/ Type					
	Office Sought: X House Senate President State: WV District: 02	ment For: 2006 Primary X Gene Other (specify) ▼	eral						
SI	UBTOTAL of Disbursements This Page (optional) .			▶				700	0.00
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American Academy of Ophthalmology Inc	Political Committee (OPH	THPAC)				
Full Name (Last, First, Middle Initial)			Transact	ion ID: 59877	7506090552	210310
Simmons for Congress				Disbursement	VVV	V
Mailing Address PO Box 268 Drawer 271			0 9	06	ž 0 0 6	
City	State Zip Code CT 06378		Amount o	of Each Disbur	sement this F	Period
Stonington Purpose of Disbursement	CT 06378		-		3000.0	00
2006 General						
Candidate Name Simmons Rob		Category/ Type				
Office Sought: X House Disburs	ement For: 2006 Primary X General					
President District 00	Other (specify)					
State: CT District: 02 Full Name (Last, First, Middle Initial)			_			
Smile Pac			Date of D	ion ID: 84848 isbursement		_
Mailing Address PO Box 2178			0 9	19	žoŏ6	S Y
City Evans	State Zip Code GA 30809		Amount o	of Each Disbur	sement this F	Period
Purpose of Disbursement 2006 Contribution			L		1500.0	00
Candidate Name	-	Category/ Type				
Senate President	ement For: Primary General Other (specify)					
State: District: Full Name (Last, First, Middle Initial)			_	5400	4000000554	
Stabenow for Us Senate			Date of D	ion ID: 51024 Disbursement		
Mailing Address PO Box 4945			0 9	06	[°] 2006	5
City East Lansing	State Zip Code MI 48826		Amount o	of Each Disbur		-
Purpose of Disbursement 2006 General			L		2500.0	00
Candidate Name Stabenow Deborah	-	Category/ Type				
X Senate President	ement For: 2006 Primary X General Other (specify)					
State: MI District: 00						
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	y Information copied from such Reports and Statem										;	
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\rangle	American Academy of Ophthalmology Inc	Political Committee (OP	HTH	PAC)								
	Full Name (Last, First, Middle Initial)					Transa	ction ID	: 826859	9060	91342	617	'80
٦.	Sue Kelly for Congress						Disburs		V · V	V	V	
	Mailing Address PO Box 599					0 ^M 9 M] ' [".	13 /	2	0 Ď 6		
		State Zip Code NY 10536				Amoun	t of Each	n Disburs	emen	t this P	erioc	t
	Purpose of Disbursement	NY 10536	_		_				2	2500.0	0	
	2006 General										_	
	Candidate Name Kelly Sue			tegory/ ype								
		ement For: 2006										
	Senate President	Primary X General Other (specify)										
	State: NY District: 19											
2	Full Name (Last, First, Middle Initial)							: 351219	9060	91342	568	310
٥.	Sweeney for Congress Inc					Date of	Disburs		v v	V -	V	
	Mailing Address Post Office Box 1465					0 9] / [] .	1 3 /	<u>'</u> 2	0 Ď 6		
	•	State Zip Code NY 12065				Amoun	t of Each	n Disburs	-		-	i T
	Purpose of Disbursement 2006 General								2	2500.0	0	
	Candidate Name Sweeney John			tegory/ ype								
	Office Sought: X House Disburse Senate	ment For: 2006 Primary X General										
	President State: NY District: 20	Other (specify)										
	Full Name (Last, First, Middle Initial)					Transa	ction ID	: 868162	2060	90552	427	 '21
Э.	Tammy Baldwin for Congress					Date of	Disburs					
	Mailing Address PO Box 696					0 ^M 9 M	/ D	06	ž	0 0 6	Υ	
		State Zip Code WI 53701				Amoun	t of Each	n Disburs	emen	t this P	erioc	d d
	Purpose of Disbursement 2006 General								2	2500.0	0	
	Candidate Name Baldwin Tammy			tegory/ ype								
	Senate President	ment For: 2006 Primary X General Other (specify)										
	State: WI District: 02											
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name								
\rangle	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc I								
۹.	Full Name (Last, First, Middle Initial) Texans for Henry Cuellar Congressional Ca	ampaign			Date	saction II of Disbur	sement		55251052
	Mailing Address 1519 Washington Street 2nd Floor Suite 200				0 ^M 9		0 6 /	20	0 6 Y
		State Zip Code TX 78042			Amou	unt of Eac	h Disburs	ement th	is Period
	Purpose of Disbursement 2006 General		Г] L.			150	00.00
	Candidate Name Cuellar Henry			ategory/ Type					
	Office Sought: X House Senate President State: TX District: 28	ment For: 2006 Primary X General Other (specify)	1						
3.	Full Name (Last, First, Middle Initial) Tom Allen for Congress Committee					saction II of Disbur	_	906090	55298747
	Mailing Address PO Box 17766				M 9			y ž 0	0 6 °
		State Zip Code			Amou		h Disburs		
	Portland	ME 04112			Amot	int or Lac	ii Disbuis		00.00
	Purpose of Disbursement 2006 General					•	•	250	,0.00
	Candidate Name Allen Thomas			ategory/ Type					
	Office Sought: X House Senate President State: ME District: 01	ment For: 2006 Primary X General Other (specify)							
). D.	Full Name (Last, First, Middle Initial) Trent Lott for Mississippi					saction II of Disbur		306092	76247170
	Mailing Address PO Box 22824				0 ^M 9			y žo	0 6 °
	•	State Zip Code MS 39225			Amou	unt of Eac	h Disburs	ement th	is Period
	Purpose of Disbursement 2006 General	100 33223		•				250	00.00
	Candidate Name Lott Trent			ategory/ Type					
	Office Sought: House Disburse X Senate President State: MS District: 00	ment For: 2006 Primary X General Other (specify)	<u> </u>	71					
s	UBTOTAL of Disbursements This Page (optional) .			▶		· ·		650	0.00
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\	NAME OF COMMITTEE (In Full)				
<u>/</u>	American Academy of Ophthalmology	Inc Political Cor	mmittee (OPH)	THPAC)	
	Full Name (Last, First, Middle Initial)				Transaction ID: 4096760609055217387
۹.	Wally Herger for Congress Committee				Date of Disbursement
	Mailing Address PO Box 1500				09
	City Chico		Zip Code 95927		Amount of Each Disbursement this Period
	Purpose of Disbursement 2006 General				1000.00
	Candidate Name Herger Wally			Category/ Type	
	Office Sought: X House Senate President Disb	ursement For: Primary Other (specif	2006 X General fy) ▼		
	State: CA District: 02		•		

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